



COUNTY OF LANARK

---

DISTRICT OF THE MIDDLE WARD

---

**ANNUAL REPORT**  
OF THE  
**MEDICAL OFFICER OF HEALTH**  
AND OF THE  
**SANITARY INSPECTOR**

---

**1920**





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MEDICAL OFFICER OF HEALTH  
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SANITARY INSPECTOR,  
1920.

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Medical Officer of Health,	-	County Offices, Hamilton.
Asst. Medical Officer of Health,	}	District Offices, Hamilton.
Sanitary Inspector,		

# CONTENTS.

	PAGE		PAGE
<b>Vital Statistics,</b> ... ..	5	<b>Report by Sanitary Inspector—</b>	
Area, Population, and Density, ...	5	Housing, ... ..	100
Birth and Death-rates, ... ..	5-6	Insanitary Dwellings, ... ..	101-113
Deaths in Public Institutions, ...	7-8	Drainage, ... ..	113
Deaths—Age periods, ... ..	9	Water Supply, ... ..	114
Infectious Diseases, ... ..	9	Scavenging, ... ..	115-119
Respiratory Diseases, ... ..	9	Water Closets, ... ..	119
Malignant Diseases, ... ..	10	Private Streets, ... ..	119
		Nuisances, ... ..	120
<b>Prevalence of Infectious Disease,</b> ...	12	Workshops, ... ..	121
Table E—Infectious Disease, ... ..	11	Tents and Vans, ... ..	121
Smallpox, ... ..	13-20	Interments, ... ..	122
Diphtheria and Membranous Croup, ...	20-23	Common Lodging-houses, ... ..	122
Scarlet Fever, ... ..	24-26	Dairies, Cowsheds, and Milkshops, ...	122
Typhus Fever, ... ..	26	Houses Let in Lodgings, ... ..	122
Typhoid Fever, ... ..	26-31	Offensive Trades, ... ..	123
Cerebro-Spinal Fever, ... ..	31, 32	Unsound Food, ... ..	123
Puerperal Fever, ... ..	32	Burial Grounds, ... ..	123
Erysipelas, ... ..	32	Proceedings under the Public Health and other Acts during 1920, ... ..	124-126
Tuberculosis, ... ..	33-41		
Refractories Industries (Silicosis)		<b>Buildings Inspector—</b>	
Scheme, 1919, ... ..	41	Building Regulations, ... ..	127
Ophthalmia Neonatorum, ... ..	41	Housing (Financial Assistance to Builders) Scheme (Scotland), 1920, ...	128
Acute Poliomyelitis or Infantile Paralysis, ... ..	41	Housing, Town Planning, &c. (Scotland), Act, 1919 (a), and Housing (Additional Powers) Act, 1919 (b), ...	128
Tetanus, &c, ... ..	41		
Pneumonia, ... ..	41-43	<b>Meat Inspection—Slaughter-houses, &amp;c.—</b>	
Malaria, ... ..	43	Baillieston, ... ..	131
Trench Fever, ... ..	43	Bellshill, ... ..	132
Dysentery, ... ..	43	Blantyre, ... ..	133
Chickenpox, ... ..	44	Larkhall, ... ..	134
Diarrheal Diseases, ... ..	44	Shotts, ... ..	135
Measles, ... ..	44	Stonehouse, ... ..	135
Whooping-Cough, ... ..	44	Strathaven, ... ..	136
Ringworm, ... ..	45	Buildings, ... ..	137
Scabies, ... ..	45	Private Slaughter-houses, ... ..	137
Venereal Diseases, ... ..	45	Unsound Meat, ... ..	137
School Closure, ... ..	45	Congenital Tuberculosis in Pigs, ...	137-139
Anthrax, Diseases of Animals Act, 1894, ... ..	45	Swine Plague, ... ..	139-141
<b>Maternity and Child Welfare,</b> ...	46-55	<b>County Hospital, Motherwell—</b>	
		Enteric Fever, ... ..	143
<b>Hospitals and Sanatoria—</b>		Scarlet Fever, ... ..	144
Table F (a), ... ..	56	Diphtheria, ... ..	146
Table F (b), ... ..	57	Puerperal Fever, ... ..	147
County Sanatorium—Shotts, ... ..	58-61	Erysipelas, ... ..	148
Do. Stonehouse, ... ..	62-65	Cerebro-Spinal Fever, ... ..	148
Do. Uppertown, ... ..	66-71	Tuberculosis, ... ..	148
Hairmyres Colony, East Kilbride, ...	72-76	Pneumonia, ... ..	149
County Hospital, Bellshill, ... ..	77-82	Influenza, ... ..	150
County Convalescent Home, Calderbank House, ... ..	83-84	Measles, ... ..	150
		Tinea Tonsurans, ... ..	150
<b>Midwives (Scotland) Act, 1915,</b> ...	85-91	Other Conditions, ... ..	150
		Venereal Diseases, ... ..	150-151
<b>General Sanitation, &amp;c.—</b>		Encephalitis Lethargica, ... ..	151-153
Housing and Town Planning, ... ..	92-95	Operations, ... ..	153
Special Districts, ... ..	96	Buildings and Grounds, ... ..	154
Water Supply, ... ..	96	Ambulance Work, ... ..	155
Drainage and Sewage Disposal, ...	97	Staff, ... ..	155
Dairies, ... ..	97	Tables A and B, ... ..	156
Veterinary Inspection of Dairy Herds, ... ..	97-98		
Staffing Arrangements, ... ..	99		



# STAFF.

## PUBLIC HEALTH DEPARTMENT.

### MIDDLE WARD DISTRICT.

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#### County and District Medical Officer—

JOHN T. WILSON, M.D., D.P.H.

#### Tuberculosis Officers and Assistant M.O.H.—

J. THOMSON DICK, M.B., Ch.B., D.P.H.

JOSEPH R. SUTHERLAND, M.B., Ch.B., D.P.H.

JAMES JOHNSTONE, M.B., Ch.B., D.P.H.

JOHN A. C. GUY, M.B., Ch.B.

#### Assistant M.O. under Child Welfare Scheme—

HENRY J. THOMSON, M.B., Ch.B.

JAMES PHILP, L.R.C.P. & S.

#### Consulting District Sanitary Inspector—

JAMES DOBSON.

#### District Sanitary Inspector—

JOHN MILLAR.

#### Inspector of Buildings—

WILLIAM MARTIN.

LOCAL SANITARY INSPECTORS, &C.,	-	-	-	11
NURSE HEALTH VISITORS,	-	-	-	17
NURSE SANITARY INSPECTORS,	-	-	-	14
SUPERINTENDENTS OF SLAUGHTER-HOUSES,	-	-	-	8

# STAFF.

## PUBLIC HEALTH HOSPITALS.

### MIDDLE WARD DISTRICT.

#### Medical Officer—

JOHN T. WILSON, M.D., D.P.H.

<i>County Hospital, Motherwell,</i>	- -	Dr. JOHN REID, Resident Physician-Superintendent.
<i>(150 beds)</i>		Dr. THOS. HUNTER, Assistant Physician-Superintendent.
		Miss J. CHAPMAN, Matron.
<i>Lightburn Joint-Hospital, Shettleston,</i>		Dr. A. J. CRONIN, Resident Physician-Superintendent.
<i>(60* beds)</i>		Miss E. TOWNSEND, Matron.
<i>County Sanatorium, Stonehouse,</i>	- -	Dr. J. R. SUTHERLAND, Resident Physician-Superintendent.
<i>(60 beds)</i>		Dr. A. H. M'LEAN, Visiting Physician.
		Miss M. THOMSON, Matron.
<i>County Sanatorium, Shotts,</i>	- -	Dr. JAMES JOHNSTONE, Physician-Superintendent.
<i>(52 beds)</i>		Dr. J. M'MILLAN, Visiting Physician.
		Miss ISA KEIR, Matron.
<i>County Sanatorium, Uppertown,</i>	- -	Dr. J. T. DICK, Physician-Superintendent.
<i>(46 beds)</i>		Dr. JAMES KIRKLAND, Visiting Physician.
		Miss M. MILLER, Matron.
<i>Hairmyres Colony,</i>	- - -	Dr. A. H. MACPHERSON, Resident Physician-Superintendent.
<i>(250 beds)</i>		Miss I. W. GRAY, Matron.
<i>County Maternity Hospital, Bellshill,</i>	-	Dr. H. J. THOMSON, Physician-Superintendent.
<i>(48 beds)</i>		Miss A. CRAWFORD, Matron.
<i>County Convalescent Home,</i>	- -	Dr. JAMES PHILP, Physician-Superintendent.
<i>Calderbank House,</i>		Miss G. M'NEILL, Matron.
<i>(30 beds)</i>		
<i>Blantyre Hospital,</i>	- - -	being used as Home for Nurse Inspectors.
<i>(10 beds)</i>		
<i>Dalserf Hospital,</i>	- - -	Dr. J. R. SUTHERLAND, Visiting Physician.
<i>(10 beds)</i>		

\* 15 beds owned by the Middle Ward District Committee.

COUNTY OF LANARK.

DISTRICT OF THE MIDDLE WARD.

(Area, 186,327 acres.)

Report by the Medical Officer of Health  
FOR THE YEAR 1920.

I.—VITAL STATISTICS.

The **Area** of the district at the close of the year was **186,327** acres.

The acreage of each parish and the population of each registration district is stated in Table B. Owing to the annexation of a portion of the Parish of Dalziel by the Combined Burghs of Motherwell and Wishaw, the area of the Middle Ward District was reduced by 296 acres. The annexation took effect on 2nd November, and resulted in a reduction in houses and population as follows:—

*Dalziel*—Houses, 93; estimated population, 500.

The density of population was 1·15 persons to the acre.

The **Population** estimated to the middle of the year was **216,000**, and on this estimate the birth and death rates have been calculated. The population includes 2,798 persons resident in institutions.

The number of inhabited houses in the district, according to the Valuation Roll, was **41,309**, and there were 285 uninhabited, compared with 343 uninhabited in the previous year, and 408 in 1918. In 1913 there were 1,738 uninhabited houses.

**Statistical Tables.**—Table A shows the birth-rates and death-rates per thousand of the population, and the infantile deaths per thousand births. It also shows the birth and death rates and infantile deaths for each year since 1911, and the average rates for the decennial periods between 1891 and 1920.

Table B shows the acreage, births, and deaths for the year in each parish and registration district, with the deaths classified according to cause, and Table C—referred to as Table B1 in previous Reports—shows the deaths classified according to cause and age periods.

The **Births** registered numbered **7,562**—males, 3,800; females, 3,762. 443, or 5 per cent., were illegitimate. The birth-rate per thousand of the population was 35·0, which, with the exception of 1914, is the highest recorded since 1910. The birth-rates for the three divisional areas were:—First, 25·1; Second, 36·0; Third, 35·1.

The **Deaths** registered numbered 2,717. After making corrections for deaths which occurred in institutions and in other districts, the deaths of persons belonging to the district amounted to **2,891**, giving a death-rate of **13·3** per thousand of the population.

The death-rate is lower than any of the average decennial rates, and only one lower annual rate—13·1 in 1917—has been recorded. The rates for the three divisional areas were:—First, 12·8; Second, 13·5; Third, 12·9.

The deaths of infants under one year numbered 763, which is equivalent to 100·9 deaths per thousand births—the lowest infantile mortality rate which has been reached. The rates for the three divisional areas were as follows:—First, 86·4; Second, 104·2; Third, 94·0. The rates for the whole district for each quinquennial period since 1891 were as follows:—

1891-95	1895-1900	1901-05	1906-10	1910-15	1916-20
129·3	130·0	125·1	123·3	118·2	102·6

The deaths of infants are referred to in detail in the portion of the report dealing with Maternity and Child Welfare.

The number of births exceeded the deaths by 4,671, which constituted the **natural increase** in population.

TABLE A.—BIRTH-RATES AND DEATH-RATES PER 1000 OF THE POPULATION. INFANTILE DEATHS PER 1000 BIRTHS.

Year.	Births.	Birth-rate.	Nett Deaths.	INFANTS UNDER 1 YEAR.		
				Death-rate.	Deaths.	Death rate.
1891 to 1900	62,323	39·1	29,080	18·1	8,098	129·9
1901 to 1910	74,121	38·9	31,188	16·3	9,212	124·2
1911	6,981	34·3	3,002	14·7	782	112·0
1912	7,111	34·9	2,967	14·5	804	113·0
1913	7,001	33·8	3,036	14·6	842	120·2
1914	7,388	35·3	3,112	14·8	899	121·6
1915	6,684	31·9	3,128	14·9	830	124·1
1916	6,572	31·4	2,877	13·7	695	105·7
1917	6,072	28·6	2,778	13·1	624	102·7
1918	6,420	30·2	3,303	15·5	660	102·8
1919	6,410	29·8	2,911	13·5	648	101·1
1920	7,562	35·0	2,891	13·3	763	100·9
1911 to 1920	68,201	32·5	30,005	14·3	7,547	110·4

PUBLIC INSTITUTIONS SITUATED WITHIN THE DISTRICT WHERE SOME  
PERSONS NOT BELONGING TO THE DISTRICT DIED AND WHOSE DEATHS  
ARE EXCLUDED.

Name of Institution.	Parish where situated.	Population. Police Census, Dec., 1920.	DEATHS.	
			Total during 1920.	Allocated to the Middle Ward District.
Kirklands Asylum, -	Bothwell,	309	14	5
Hartwood Asylum, -	Shotts,	1,134	75	29
Dalziel Poorhouse, -	Dalziel,	96	7	2
Thrashbush Home, -	New Monkland,	84	22	4
Omoa House, - -	Shotts,	142	41	33
County Hospital, Motherwell, - -	Dalziel,	331	105	98
County Sanatorium, Stonehouse, - -	Stonehouse,	73	10	6
County Sanatorium, Shotts, - - -	Shotts,	65	22	18
County Sanatorium, Uppertown, - -	New Monkland,	51	12	6
Hairmyres Colony, -	East Kilbride,	158	—	—
County Hospital, Bellshill, - - -	Bothwell,	69	32	30
County Convalescent Home, Calderbank House, -	Old Monkland,	37	—	—
Blantyre Hospital, -	Blantyre,	4	—	—
Dalserf Hospital, -	Dalserf,	3	9	4
Blantyre Cottage Hospital, - - -	Blantyre,	3	4	4
St. Vincent Home for Deaf and Blind Children, -	Old Monkland,	214	2	2
Maternity Home Hospital, Airdrie, - - -	New Monkland,	25	1	—
Total, -		2,798	356	241



PUBLIC INSTITUTIONS SITUATED OUTWITH THE DISTRICT WHERE SOME PERSONS BELONGING TO THE DISTRICT DIED AND WHOSE DEATHS ARE INCLUDED.

<i>General Hospitals.</i>				<i>Poor Institutions.</i>			
Glasgow Royal Infirmary,	-	137		Hamilton Poorhouse,	-	-	20
Glasgow Western Infirmary,	-	23		Barnhill Poorhouse,	-	-	2
Glasgow Victoria Infirmary,	-	10		Old Monkland Poorhouse,	-	-	2
Edinburgh Royal Infirmary,	-	7					
Alexander Hospital,	-	-	1				
				<i>Other Institutions.</i>			
				Royal Samaritan Hospital,			
				Glasgow,	-	-	7
				Royal Hospital for Sick			
				Children, Glasgow,	-	-	21
<i>Infectious Hospitals.</i>				Royal Maternity and Women's			
Lightburn Hospital,	-	-	8	Hospital, Glasgow,	-	-	14
Belvidere Hospital,	-	-	5	Royal Cancer Hospital, Glasgow,			4
Robroyston Hospital,	-	-	1	Ralston Hospital, Paisley,	-	-	1
Ruchill Hospital,	-	-	1	Glasgow Western District			
				Hospital,	-	-	1
				Victoria Hospital, Rothesay,	-	-	1
				Edinburgh War Hospital,	-	-	2
<i>Asylums.</i>				Bellahouston Hospital, Car-			
Riccartsbar Asylum,	-	-	1	donald,	-	-	1
Aberdeen Asylum,	-	-	1	Private Nursing Homes,	-	-	36
Woodilee Asylum,	-	-	1				
			196				112
				TOTAL, 308			

The foregoing tables show that of 356 deaths occurring in institutions within the district, 115 were excluded, as they were of persons not belonging to the Middle Ward, and that, on the other hand, 308 deaths were included, as they were of persons belonging to the Middle Ward who died in institutions outwith the district. For the same reason 53 deaths were excluded of persons dying in private residences, and 34 such deaths were included.

DEATHS IN RELATION TO AGE AND CAUSE.—Table C shows the deaths classified according to age and cause. The deaths are here arranged

in recognised age periods, and the percentage proportion of deaths at each age period is given :—

Infant period	—under 1 year,	763 deaths or 26·4 per cent.
Under school age	— 1·5 years, -	317 „ 10·9 „
School age	— 5-15 „ -	144 „ 4·9 „
Adolescent	—15-25 „ -	142 „ 4·7 „
Early mature period	—25-45 „ -	362 „ 12·1 „
Late „ „	—45-65 „ -	542 „ 18·1 „
Post „ „	—65 years and upwards, -	621 „ 20·8 „

**Infectious Disease.**—The number of deaths due to infectious diseases which are compulsorily notifiable was 632, made up thus :—

Smallpox, - - -	5	Cerebro-spinal Fever,	14
Diphtheria, - - -	27	Pulmonary Tuberculosis,	161
Erysipelas, - - -	6	Tuberculosis (all other	
Scarlet Fever, - - -	15	forms), - - -	103
Typhoid Fever, - - -	6	Pneumonia, - - -	272
Puerperal Fever, - - -	23		

The deaths from infectious diseases not compulsorily notifiable amounted to 251 :—Diarrhoea, 128 ; measles, 73 ; whooping-cough, 50. The prevalence of the various infectious diseases is further referred to in the second portion of the Report.

**Respiratory Diseases.**—The following tabular statement shows the deaths and death-rates from the various causes which fall under this heading ; the decrease shown is very largely due to the cessation of the influenza epidemic of 1918 and 1919, though there is also a decrease in deaths from pneumonia and bronchitis compared with 1919.

Year.	PNEUMONIA.		BRONCHITIS.		INFLUENZA.		OTHER RESPIRATORY DISEASES.	
	Deaths.	Death-rate.	Deaths.	Death-rate.	Deaths.	Death-rate.	Deaths.	Death-rate.
1911	311	1·52	200	0·98	22	0·10	28	0·13
1912	343	1·68	188	0·92	12	0·05	29	0·14
1913	240	1·59	168	0·81	28	0·13	33	0·15
1914	288	1·37	199	0·95	18	0·08	56	0·26
1915	355	1·69	211	1·00	39	0·18	38	0·18
1916	268	1·28	146	0·69	9	0·04	23	0·11
1917	277	1·30	150	0·70	18	0·08	40	0·18
1918	350	1·65	173	0·81	486	2·29	32	0·15
1919	308	1·43	193	0·89	256	1·19	27	0·12
1920	272	1·25	178	0·82	80	0·37	43	0·19

**Malignant Diseases.**—The deaths falling under this heading numbered 168, as compared with 172 in the previous year. The number of deaths from these diseases has been gradually increasing, and for the six quinquennial periods from 1891 to 1920, the average annual number of deaths certified as due to malignant disease was 75, 87, 97, 136, 137, and 160 respectively. The age-incidence of the deaths during 1920 was as follows:—

Age groups,	-1	1-5	5-10	10-15	15-25	25-35	35-45	45-55	55-65	65-75	75 and over	Total
Deaths,	—	1	—	2	1	4	13	34	47	46	20	168

**Localisation of Disease.**—In almost 70 per cent. the disease affected some portion of the gastro-intestinal tract, the genito-urinary tract in 11 per cent., and the breast in 9 per cent.

The type of disease was:—Carcinoma or cancer, 129; malignant disease, 24; sarcoma, 11; epithelioma, 2; rodent ulcer, 2.



TABLE B.—MIDDLE WARD.—Year 1920.—Population, Acreage, Births, and Deaths\* in each Registration District, with Deaths classified according to cause.

[illegible]

\* These are the Nett or Adjusted Deaths, having been corrected for Institutions and other Transfers in accordance with the Scottish Board of Health's instructions.





TABLE C.—MIDDLE WARD.—Year 1920.—Deaths classified according to cause and age periods, and corrected for Institutions, &c.

10B1

Population, 216,000; Acreage, 186,327; Registered Births, { Legitimate, M., 3,582; F., 3,537; Illegitimate, M., 218; F., 225; Total, 7,562. Deaths under 1 year, { Legitimate, 739. Illegitimate, 24.

					NETT DEATHS AT DIFFERENT AGE PERIODS.																	Rates per 1,000 Popula- tion.	Registered in Institu- tions in District.					
CAUSE OF DEATH.	Registered in District.	Trans- ferred from other Districts.	Trans- ferred to other Districts.	Nett Deaths.	Weeks.					Months.					Years.													
					-1	1.	2-	3-	Total -4	1-	3-	6-	9-	Total -12	1-	5-	10-	15-	25-	35-	45-			55-	65-	75 and over.		
All Causes { Certified, - Uncertified, -	2,711 6	338 4	167 1	2,882 9	185 1	41 ...	39 ...	32 ...	297 1	131 1	135 ...	102 ...	96 ...	761 2	317 ...	83 ...	61 ...	140 2	161 ...	199 2	218 ...	324 ...	318 3	300 ...	13.342 .0416	354 ...		
Enteric Fever, - - -	3	3	...	6	...	...	...	...	...	...	...	...	...	...	...	1	1	3	...	1	...	...	...	...	.0277	3		
Typhus Fever, - - -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	1	1	...	...	...	.0231	12	
Smallpox, - - -	12	1	8	5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Chickenpox, - - -	...	...	...	...	...	...	...	...	...	1	1	8	14	24	45	4	...	...	...	...	...	...	...	...	...	.3380	3	
Measles, - - -	73	...	...	73	...	...	...	...	...	...	...	...	1	1	10	1	2	...	1	...	...	...	...	...	...	.0694	10	
Scarlet Fever, - - -	15	...	...	15	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	.2315	1	
Whooping-Cough, - - -	48	3	1	50	...	...	...	...	...	7	4	4	10	25	22	3	...	...	...	...	...	...	...	...	...	.1250	19	
Diphtheria, - - -	27	1	1	27	...	...	...	...	...	...	...	1	1	2	19	5	...	1	...	...	...	...	...	...	...	.3704	5	
Influenza, - - -	79	1	...	80	...	1	...	...	1	1	2	...	5	9	9	...	3	6	9	10	10	11	6	7	.0277	3		
Erysipelas, - - -	6	...	...	6	...	...	...	1	1	2	...	...	...	3	...	...	...	...	1	...	2	...	...	...	...	.1759	1	
Other Septic Diseases, - - -	16	22	...	38	...	...	...	1	1	2	3	...	...	6	1	7	3	3	3	3	6	2	1	3	...	.0648	14	
Cerebro-Spinal Fever, - - -	15	...	1	14	...	...	...	...	...	...	...	4	1	5	5	1	1	1	...	1	...	...	...	...	...	.7454	62	
Pulmonary Tuberculosis, - - -	182	7	28	161	...	...	...	...	...	...	2	1	...	3	9	2	6	37	37	35	12	14	5	1	...	.2175	13	
Meningeal Tuberculosis, - - -	47	2	2	47	...	1	...	...	1	2	6	8	1	18	21	3	3	1	1	...	...	...	...	...	...	.1389	1	
Abdominal Tuberculosis, - - -	26	4	...	30	...	...	...	...	...	...	1	1	3	5	11	4	4	1	2	2	1	...	...	...	...	.1203	11	
Other Tuberculosis, - - -	26	3	3	26	...	...	...	...	...	...	3	...	...	3	5	3	3	6	2	2	2	...	...	...	...	.7778	16	
Malignant Diseases, - - -	143	37	12	168	...	...	...	...	...	...	...	...	...	...	1	...	2	1	4	13	34	47	46	20	...	.0416	2	
Rheumatic Fever, - - -	8	1	...	9	...	...	...	...	...	...	...	...	...	...	...	...	2	3	1	1	...	1	1	...	...	.0027	4	
Encephalitis Lethargica, - - -	6	2	2	6	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...	4	...	...	...	...	.1713	2	
Meningitis (Simple), - - -	35	2	...	37	...	...	1	...	1	3	4	6	4	18	12	2	3	...	...	...	...	2	...	...	...	.6666	11	
Cerebral Hæmorrhage, - - -	144	4	4	144	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...	10	12	33	49	38	...	.1481	1	
Convulsions, - - -	33	...	1	32	5	4	4	...	13	2	5	2	3	25	5	2	...	...	...	...	...	...	...	...	...	.2778	27	
Other Nervous Diseases, - - -	68	9	17	60	...	...	...	...	...	1	...	1	...	2	1	...	4	3	6	7	7	9	14	7	...	1.0666	33	
Organic Heart Disease, - - -	245	20	26	239	...	...	...	...	...	...	1	...	...	1	1	5	5	11	16	14	31	59	53	43	...	.8241	8	
Bronchitis, - - -	180	6	8	178	...	2	2	1	5	14	17	12	9	57	14	2	...	...	1	3	9	32	29	31	...	1.2593	22	
Pneumonia, - - -	265	15	8	272	...	2	2	3	7	20	29	19	18	93	60	7	4	10	21	19	11	22	20	7	...	.0416	...	
Laryngitis, - - -	9	...	...	9	...	...	...	...	...	1	...	1	...	2	3	3	...	...	...	...	...	1	...	...	...	.1574	3	
Other Respiratory Diseases, - - -	29	5	...	34	...	1	...	1	2	...	1	2	...	5	4	3	1	1	...	1	4	6	5	4	...	.5926	3	
Diarrhœa, - - -	129	4	5	128	1	...	5	4	10	21	29	25	22	108	20	...	...	...	...	...	...	...	...	...	...	.0972	...	
Appendicitis and Typhlitis, - - -	2	19	...	21	...	...	...	...	...	...	...	...	...	...	...	3	4	6	3	3	1	1	...	...	...	.0509	...	
All Liver Diseases (not Malignant), - - -	6	5	...	11	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	5	2	1	...	...	.2778	3	
Other Digestive Diseases, - - -	34	29	3	60	...	...	...	...	...	4	2	1	...	7	5	6	1	4	3	9	9	7	4	5	...	.2454	8	
Nephritis & Bright's Disease, - - -	47	10	4	53	...	...	...	...	...	...	...	...	...	...	2	1	2	3	6	3	10	13	9	4	...	.1065	11	
Puerperal Sepsis, - - -	17	6	...	23	...	...	...	...	...	...	...	...	...	...	...	...	...	7	7	9	...	...	...	...	...	.0972	2	
Diseases and Accidents of Pregnancy, &c., - - -	17	5	1	21	...	...	...	...	...	...	...	...	...	...	...	...	...	2	8	11	...	...	...	...	...	.1852	3	
Congenital Malformations, - - -	37	3	...	40	10	7	4	4	25	10	2	2	...	39	...	1	...	...	...	...	...	...	...	...	...	.5976	5	
Premature Birth, - - -	128	3	2	129	95	13	3	9	120	8	1	...	...	129	...	...	...	...	...	...	...	...	...	...	...	.6112	9	
Atrophy, Debility, &c., - - -	128	4	...	132	55	8	14	6	83	27	16	2	1	129	3	...	...	...	...	...	...	...	...	...	...	.0740	...	
Atelectasis, - - -	16	...	...	16	10	1	2	2	15	...	1	...	...	16	...	...	...	...	...	...	...	...	...	...	...	.0018	1	
Injury at Birth, - - -	4	...	...	4	4	...	...	...	4	...	...	...	...	4	...	...	...	...	...	...	...	...	...	...	...	.0018	2	
Suffocation, overlying, - - -	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	.0013	...
Syphilis, - - -	4	2	2	4	2	...	...	...	2	...	...	...	...	2	1	...	...	...	...	...	1	...	...	...	...	...	.6389	1
Rickets, - - -	3	...	...	3	...	...	...	...	...	...	1	...	...	1	2	...	...	...	...	...	...	...	...	...	...	.0009	...	
Violence, - - -	94	58	14	138	1	...	...	...	1	1	...	...	1	3	16	9	4	24	18	23	12	16	8	5	...	1.3564	19	
Suicide, - - -	1	1	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	...	.2175	...
Other Defined Diseases, - - -	264	44	15	293	1	1	...	...	2	1	1	1	2	7	8	4	2	4	8	16	25	40	57	122	...	...		
Ill-defined Diseases, - - -	46	1	...	47	2	...	2	...	4	4	3	...	...	11	2	...	...	1	2	3	7	6	12	3	...	...		
Total, - - -	2,717	342	168	2,891	186	41	39	32	298	132	135	102	96	763	317	83	61	142	161	201	218	324	321	300	13.384	354		



TABLE E.—NUMBER OF CASES OF INFECTIOUS SICKNESS RECOGNISED IN EACH PARISH DURING 1920.

PARISH.	Smallpox.	Diphtheria.	Erysipelas.	Scarlet Fever.	Typhus Fever.	Typhoid Fever.	Puerperal Fever.	Cerebro-Spinal Fever.	Infantile Paralysis.	Ophthalmia Neonatorum.	Pulmonary Tuberculosis.	Non-Pulmonary Tuberculosis.	Malaria.	Dysentery.	Trench Fever.	Primary Pneumonia.	Influenza-Pneumonia.	Chickenpox.	Total.
1. Avondale, -	-	5	1	35	-	5	1	-	-	-	17	5	2	-	-	1	-	13	85
2. East Kilbride, -	-	3	3	9	-	1	-	-	-	-	9	3	-	-	-	1	-	1	30
3. Glasgow, -	-	4	2	5	-	1	-	-	-	-	2	1	-	-	-	-	1	-	16
4. Stonehouse, -	-	4	1	3	-	-	-	-	-	2	8	8	-	-	-	2	-	45	73
<i>First Division,</i>	-	16	7	52	-	7	1	-	-	2	36	17	2	-	-	4	1	59	204
5. Blantyre, -	-	27	15	130	-	4	8	3	-	9	45	38	8	-	-	79	6	38	410
6. Bothwell, -	2	131	70	453	-	7	19	10	-	22	105	84	21	-	-	172	4	138	1,238
7. Cambuslang, -	5	68	27	74	-	1	7	1	1	26	45	50	7	2	-	71	6	27	418
8. Cambusnethan, -	-	21	19	105	-	1	1	-	-	7	19	38	5	1	-	18	3	22	260
9. Dalserf, -	1	38	1	36	-	25	2	3	1	1	24	33	4	-	-	22	-	13	204
10. Dalziel, -	-	5	1	10	-	2	2	-	-	1	3	1	1	-	-	1	-	-	27
11. Hamilton, -	-	6	-	130	-	2	5	1	-	-	6	8	1	-	-	14	1	2	176
<i>Second Division,</i>	8	296	133	938	-	42	44	18	2	66	247	252	47	3	-	377	20	240	2,733
12. New Monkland, -	2	14	5	36	-	10	3	-	-	1	8	23	5	-	-	11	4	16	138
13. Old Monkland, -	14	29	17	97	-	2	6	2	-	8	27	28	7	1	-	35	1	44	318
14. Shotts, -	4	39	13	226	-	2	7	2	-	12	22	49	3	-	-	16	3	22	420
<i>Third Division,</i>	20	82	35	359	-	14	16	4	-	21	57	100	15	1	-	62	8	82	876
<i>Middle Ward,</i>	28	394	175	1,349	-	63	61	22	2	89	340	369	64	4	-	443	29	381	3,813

Cases notified in Institutions of persons belonging to other Areas, -

16



## II.—PREVALENCE OF INFECTIOUS DISEASE.

The diseases included under this heading are classified in relation to notification, and are divided into two groups. Group I includes diseases which are compulsorily notifiable (a) under the Notification Act, (b) by adoption under the Notification Act, and (c) by order of the Scottish Board of Health, and Group II not compulsorily notifiable diseases. The diseases included in these groups are as follows:—

### GROUP I.

(A)	(B)	(C)
Smallpox.	<i>August, 1906.</i>	<i>1st August, 1912.</i>
Diphtheria.	Cerebro-spinal Meningitis.	Pulmonary Tuberculosis.
Scarlet Fever.	<i>24th October, 1912.</i>	<i>1st July, 1914.</i>
Typhus Fever.	Ophthalmia Neonatorum.	All forms of Tuberculosis.
Typhoid Fever.	Acute Poliomyelitis.	<i>1st August, 1919.</i>
Puerperal Fever.	Tetanus.	Malaria.
Erysipelas.	Anthrax.	Dysentery.
	Glanders.	Trench Fever.
	Actinomycosis.	Acute Primary Pneumonia, Acute Influenzal- Pneumonia. <i>1st October, 1920.</i> Chickenpox.*

### GROUP II.

Measles.	Chickenpox.*	Ringworm.
German Measles.	Mumps.	Scabies.
Whooping-Cough.		

Compared with the previous year there was an increase of 1,243 cases notified. The outstanding feature of the occurrence of infectious disease was the outbreak, in the month of March, of smallpox, of which disease 28 cases were notified. In accordance with an order of the Scottish Board of Health chickenpox became notifiable on 1st October, and 381 cases were notified before the end of the year. In addition the following diseases show an increase when compared with the previous year:—Scarlet fever, 532; pneumonia, 312; diphtheria, 41; non-pulmonary tuberculosis, 38; erysipelas, 35; ophthalmia neonatorum, 26; puerperal fever, 21; cerebro-spinal fever, 4.

Decreases took place in the following diseases:—Malaria, 96; typhoid fever, 40; pulmonary tuberculosis, 26; dysentery, 8; trench fever, 3; infantile paralysis, 1.

\* Chickenpox was made compulsorily notifiable under the Public Health (Chickenpox) Regulations (Scotland), 1920, from 1st October, 1920, to 1st April, 1921, and in the current year the period was extended to 1st October, 1921.

**Smallpox.**

TABLE D1.—SMALLPOX.

YEAR.	NUMBERS.		YEAR.	NUMBERS.	
	Cases Notified.	Deaths Registered.		Cases Notified.	Deaths Registered.
(1)	(2)	(3)	(1)	(2)	(3)
1891	...	...	1906	1	...
1892	1	1	1907	...	...
1893	11	1	1908	...	...
1894	8	1	1909	...	...
1895	1	...	1910	2	...
<i>Average,</i>	<i>4</i>	...	<i>Average,</i>	...	...
1896	...	...	1911	...	...
1897	2	...	1912	...	...
1898	1	...	1913	1	...
1899	11	...	1914	...	...
1900	7	1	1915	...	...
<i>Average,</i>	<i>4</i>	...	<i>Average,</i>	...	...
1901	50	6	1916	...	...
1902	35	1	1917	...	...
1903	15	1	1918	...	...
1904	127	9	1919	...	...
1905	38	1	1920	28	5
<i>Average,</i>	<i>53</i>	<i>3</i>	<i>Average,</i>	<i>5</i>	<i>1</i>



Cases notified, 28; deaths, 5; fatality rate, 17·86 per cent.

In the County Report the epidemic prevalence of the disease throughout the whole County District and during the whole period of County administration is dealt with, and it is only necessary to refer here in detail to the Middle Ward District.

On previous occasions when smallpox appeared in epidemic form in this area the outbreak occurred as an extension from the City of Glasgow. In 1920 the disease appeared in Glasgow in the month of February, while the first case in the Middle Ward Area was notified towards the end of March.

Incidence month by month thereafter, and with reference to distribution according to parish, is given in the following table:—

Parish.	March.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Total.
Bothwell, -	—	—	—	—	1	1	—	—	2
Cambuslang, -	—	—	1	—	—	—	3	1	5
Dalserf, -	—	—	—	1	—	—	—	—	1
New Monkland, -	—	—	—	—	—	—	2	—	2
Old Monkland, -	2	3	5	—	—	—	4	—	14
Shotts, -	—	2	1	—	—	1	—	—	4
Total, -	2	5	7	1	1	2	9	1	28

Of the 28 cases, 15 were males and 13 were females; 4 males and 1 female died.

20 families were affected, 1 secondary case occurring in each of two households, and 2 secondary cases in each of three.

The following table shows the cases arranged according to age groups and in relation to vaccination:—

Age groups,	-1	1-5	5-10	10-15	15-25	25-35	35-45	45-55	55-65	65-75	75+
Unvaccinated,	—	1	3*	1	1	—	—	—	—	—	—
Vaccinated in infancy only,	—	—	—	1	4	3	4	2	2	—	1†
Vaccinated in infancy and revaccinated,	—	—	—	—	1	1	2	1	—	—	—

The above figures demonstrate what has so frequently been shown before, viz., the influence of vaccination in protecting the individual against smallpox during a limited number of years.

\* Two of those children were vaccinated for the first time on the 7th day of incubation period, and each had a comparatively mild illness.

† Had a previous attack of smallpox, 67 years ago.

*Unvaccinated cases*, 6. Those were aged  $1\frac{1}{2}$ , 5, 6, 9, 10, and 21 years respectively, and, with the exception of two, aged 5 and 6 years, suffered from the disease in a very serious form—confluent or semi-confluent smallpox—but fortunately without fatal result. The two exceptions referred to were both vaccinated on the 7th day after exposure to infection, and as a result developed the disease in a very modified form.

*Cases vaccinated in infancy only*, 17. One occurred in a person under 15 years of age, this being in the case of a girl aged 11 years, who had the disease in so mild a form that the diagnosis was not even suspected until the development of a secondary case in the family, while in all the other cases at least twenty years had elapsed between vaccination and the attack of smallpox.

*Cases vaccinated in infancy and revaccinated*, 5. The illness in each instance was mild and highly modified; so much so that in 2 of the cases, viz., ex-soldiers, who had been revaccinated in 1915 and 1916 respectively, the diagnosis of smallpox would certainly not have been made had the patients not been under special observation as contacts in infected households. The constitutional disturbance was very mild, and the only evidence of eruption consisted of one or two papules, which appeared on the face.

*Vaccinia*. One case occurred of exceptionally severe constitutional reaction after vaccination, and is worthy of note on account of the close resemblance of the reaction to the pre-eruptive symptoms of smallpox. The reaction occurred in the case of a contact—a married woman who had not previously been vaccinated, and who as a precautionary measure was vaccinated by the Assistant Medical Officer of Health on 15th April. On the evening of 20th April, which corresponded with the twelfth day after exposure to infection of smallpox, she began to complain of headache and backache, both of a severe character. On the following morning she complained of shivering, and headache and backache were still present. Later on in the same day she became sick and vomited. Her temperature on the afternoon of 21st April was  $101^{\circ}$  F., while on the afternoon of 22nd April headache and backache were still severe, the latter being very marked indeed, there was great prostration, patient was totally confined to bed, and her temperature was  $102.2^{\circ}$  F. When vaccinated she was given four marks, all of which reacted very well, and each of which, when the constitutional disturbance commenced, showed a well-marked

inflammatory areola, extending about  $1\frac{1}{2}$  inches from the margin. It was fully expected that a variolous rash would be present on the evening of the 22nd, or would appear during the night, but when patient was seen at 10 a.m. on the 23rd there was absolutely no evidence of rash, and constitutional symptoms had disappeared, though the temperature was still elevated—namely,  $101\cdot8^{\circ}$  F. At 6 p.m. on the same day the temperature had dropped to  $99^{\circ}$  F, patient was free from all discomfort, and a careful examination failed to reveal any evidence of rash. On the morning of the 24th, patient was well, and the temperature normal. The case is remarkable in respect of the severity of the constitutional reaction following vaccination. The symptoms commenced on the fifth day after vaccination, and were so severe as to counterfeit all the classical pre-eruptive symptoms of smallpox.

*Deaths.*—5 cases ended fatally. The patients had been vaccinated in infancy only, and at the time of death their ages were 36, 43, 44, 46, and 64 years respectively, so that in each instance such an elapse of time had occurred as to nullify the protection originally conferred in infancy. In 4 of the cases the illness was of hæmorrhagic type, while in the fifth the patient suffered from confluent smallpox.

The confluent case was infected by a “missed” case of a very mild type. In one of the hæmorrhagic cases it was not possible to trace any source of infection, and in the other 3 cases of hæmorrhagic type it could only be said that the patients had been infected in a Glasgow area where smallpox was prevalent, but in none of the cases was it possible actually to trace the source to a previously known case of smallpox.

The case suffering from confluent smallpox died on the 17th day of illness, while the hæmorrhagic cases died on the 19th, 8th, 8th, and 7th days respectively. In the case of the death on the 19th day the patient had a well-marked pre-eruptive scarlatinaform rash on the chest and abdomen, spreading to the buttocks, thighs, and shoulders. This rash was hæmorrhagic in character, but the papular rash which subsequently appeared did not show any evidence of hæmorrhage.

*Duration of Illness.*—The average duration of illness was 33·5 days. The table below shows the average duration for (A) all cases; (B) fatal cases, and (taking into account in the following groups only the cases which recovered) for (C) unvaccinated cases; (D) cases vaccinated only

during incubation period; (E) cases vaccinated in infancy; and (F) cases vaccinated in infancy and revaccinated in later years:—

	A.	B.	Cases recovered.			
			C.	D.	E.	F.
	All cases.	Fatal cases.	Unvaccinated.	Vaccinated during incubation period.	Vaccinated in infancy.	Vaccinated in infancy and revaccinated.
Duration of illness in days,	33·5	10·8	58	37	36	32

*Source of Infection.*—Smallpox appeared in Glasgow during the month of February, and the first cases in the County Area occurred towards the end of March, the patients being two boys, aged 9 and 10 years, from different families residing in the Tollcross district of Old Monkland Parish, close to the City boundary. Though contact with a known case of smallpox could not be established in either instance, there is little doubt of the source of infection, as both patients were much in contact with people from an infected area in the City, and both attended a Glasgow school. One of these cases gave rise to 2 secondary cases in the same family. Of the other 10 cases in Old Monkland Parish, 2—1 from Tollcross and 1 from Baillieston—were employed in the East End of Glasgow, and were probably infected there; one gave rise to a secondary case in another family. In another Tollcross case the diagnosis was missed for almost three weeks, and this patient infected two others, one in her own family and one outside. Of the 4 remaining cases in Old Monkland one was that of a woman who was in the habit of shopping regularly in an infected Glasgow district, while another was a contact of a known Glasgow case; the two others were found after admission to hospital to be suffering from severe chickenpox and vaccinia respectively.

2 cases occurred in Bothwell Parish. One was a miner working at a colliery which employed a large number of men from Glasgow, while the other, when coming from Ayrshire to Lanarkshire, stayed for one day with a relative in Parkhead, and 12 days later developed the disease.

In Cambuslang Parish there were 5 cases. One was a contact of a known Glasgow case; one was a girl who had been employed in a Glasgow factory beside another female employee who had not been well, and who “had spots on her face”; while a third came to Cambuslang from a City common model lodging-house. The second mentioned case gave rise to 2 secondary cases in her own family.



In Dalserf Parish (in which is Dalserf Hospital, where almost all the County and Burgh cases were treated) there was 1 case, but the source of infection was not traced.

2 cases occurred in New Monkland Parish. The patients—husband and wife—had attended the funeral of a friend in a district outwith the County who died from unrecognised smallpox. Twelve days after the funeral they both developed the disease.

In Shotts Parish there were 4 cases, 1 in one family and 3 in another. The single case was a woman who had visited friends and a picture-house in the Parkhead area of Glasgow 12 days before she sickened; while in the other family, where there were 2 primary cases and 1 secondary, the two former had on a single occasion left the very isolated district in which they resided, had travelled by crowded tramcar with numerous Glasgow holiday-makers, and sickened at the end of an incubation period of 12 days from that date.

The precautions taken against the spread of the disease were the same in each case. The patient was removed to hospital at once and disinfection of the house and clothing carried out. The contacts were ascertained; they were visited and vaccinated or revaccinated immediately. The household contacts were kept under observation in their own homes, by daily visitation by the Public Health Staff, and only in the case of two families was it considered advisable to remove the contacts to a reception house. It is satisfactory to note that the precautions taken were successful in preventing the spread of the disease, and only in two instances was it found that infection had spread beyond the members of the infected family; both of these cases were untraced contacts, one the contact of a missed case, and the other a contact who had gone to his own doctor to be vaccinated, and who had not thought it necessary to report that vaccination had been unsuccessful.

In addition to the supervision of contacts of cases notified in the district, many visits were made both by the Assistant Medical Officers of Health and by the Nurse Inspectors to contacts of cases which had occurred in other areas, and every known contact was kept under close observation until after the expiration of the incubation period. The opinion of the Assistant Medical Officers of Health was frequently sought by general practitioners in cases where the diagnosis appeared to be doubtful.

In order to encourage the public to avail themselves of the protection conferred by successful vaccination the Middle Ward District Committee decided, on 12th May, 1920, that vaccination should be



offered to everyone free of cost, and subsequently a circular letter was issued authorising every medical practitioner to carry out free vaccination, and intimating also that a fee of 2s. 6d. would be paid by the Local Authority for each successful result. A supply of calf lymph was provided by the Board of Health, and this was distributed free through the Public Health Department to all practitioners in the District. The offer of free vaccination was largely taken advantage of by the public, especially by those resident in infected areas, and in all 17,085 doses of calf lymph were issued, and 16,814 successful vaccinations performed. It was frequently noted, however, that almost immediately cases ceased to occur in any particular locality the demand for vaccination in that locality diminished very rapidly. This was more or less to be expected, because, judging by the number of persons taking advantage of the conscientious objection clause in the Vaccination Act of 1907, the prejudice against vaccination has increased very rapidly of recent years among large sections of the community. The number of unvaccinated children varies considerably in different registration districts, but at the beginning of the year the percentage in some of the mining and manufacturing areas was as high as 66, and the total number of unvaccinated children in the whole Middle Ward was estimated to be about 27,000. A table showing the number of statutory declarations of objection to vaccination for the years 1907-1919 is given on page 91 of the 1914-1919 Summary Report.

Soon after the outbreak commenced the question of making chickenpox compulsorily notifiable was considered by the District Committee, but it was decided that the step did not appear to be necessary, in view of the willingness already shown by medical practitioners to bring to the notice of the Medical Officer of Health any case in which there was doubt of the diagnosis. On 1st October, however, Chickenpox was made compulsorily notifiable for a period of 6 months by an order of the Board of Health; the duration of the order has been extended during the current year, and remains in force till 30th September, 1921.

In September, when 9 cases occurred, it was thought extremely probable that the epidemic would continue and increase in prevalence during the winter months, and preparations were made accordingly. Up to this time all the cases (with the exception of 5 from Tollcross, who were treated in Belvidere and Robroyston Hospital, Glasgow) had been admitted to the small County Hospital at Dalserf, and arrangements were made to provide additional accommodation by

the opening, on 9th September, of the County Sanatorium, Uppertown, this being considered necessary, as accommodation had to be made not only for County cases but also for cases from the burghs within the County. Contrary to expectation, however, the outbreak came to a sudden termination, so far as the Middle Ward was concerned, in October, and did not exhibit the seasonal prevalence anticipated—a variation perhaps in part accounted for by the unseasonable character of both the summer and winter months of 1920.

### Diphtheria and Membranous Croup.

TABLE D2.—DIPHTHERIA AND MEMBRANOUS CROUP.

YEAR.	NUMBERS.		RATES.		
	Cases Notified.	Deaths Registered.	Deaths per 100 Cases.	Cases per 1,000 Population.	Deaths per 10,000 Population.
(1)	(2)	(3)	(4)	(5)	(6)
<i>Average,</i> 1891-95.	210	74	35·1	1·39	4·9
<i>Average,</i> 1896-1900.	144	35	24·3	0·85	2·0
<i>Average,</i> 1901-05.	151	34	22·3	0·80	1·8
<i>Average,</i> 1906-10.	383	41	10·8	1·93	2·0
<i>Average,</i> 1911-15.	336	32	9·9	1·63	1·5
1916	278	37	13·3	1·33	1·7
1917	225	25	11·1	1·06	1·1
1918	270	28	10·3	1·27	1·3
1919	353	29	8·2	1·64	1·3
1920	394	27	6·8	1·82	1·2
<i>Average,</i>	304	29	10·0	1·42	1·3

Cases, 394; deaths, 27; fatality, 6·8 per cent.

The number of cases notified as diphtheria, viz., 394, is the highest since 1911, but the fatality rate, viz., 6·8 per cent., is the lowest yet recorded, and it is satisfactory to note that the death-rate—1·2 per 10,000 of the population—is also low.

The number of removals to hospital was 356, or 90 per cent.

The milk supply was not responsible in any instance for the spread of infection. 3 cases occurred on dairy farms, but the disease did not extend beyond the one individual affected on each farm.

The facilities offered for bacteriological examination continued to be largely taken advantage of by practitioners, who submitted swabs in 557 cases, 81 of which proved positive. In many instances swabs from contacts in infected households were taken by the nurse inspectors as a preventive measure; 698 such swabs were taken, and positive results were obtained in 9 cases. Those positive contacts were either removed to hospital or treated at home, according to the household circumstances.

308,000 units of anti-diphtheritic serum were issued to practitioners. Although serum is given free on request, and although the successful treatment of diphtheria is believed to depend largely on its early administration, only in 67 of the 356 cases removed to hospital was it given prior to admission. Only 4 deaths occurred in hospital of patients who had received serum at home.

#### CLINICAL CASES AND DEATHS DURING EACH MONTH AND AT CERTAIN AGE PERIODS—

	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	
Cases, -	52	40	42	35	20	29	13	26	24	43	34	36	394
Deaths, -	6	1	1	3	1	2	1	2	2	2	3	3	27
Ages,	-1		1-5	5-15		15-25	25-45	45-65	65+	All ages			
Cases, -	-	10	138	219		23	3	1	—				394
Deaths, -	-	2	19	5		1	—	—	—				27

The cases and deaths occurred throughout the district as follows :—

*Avondale*.—5 cases; no deaths. The cases were scattered throughout the district, and occurred at different periods of the year.

*East Kilbride*.—3 cases; no deaths. 1 case occurred in a dairy farm. The patient was removed to hospital, and all the contacts were swabbed, but with negative result. No further cases occurred, and it was not found necessary to interfere with the milk supply.

Another case also occurred in a dairy farm, but in this case all the milk was churned, and there was consequently no danger of the disease being spread by its means. The case was not removed to hospital, and no further cases occurred.

*Glasford*.—4 cases; no deaths. The cases were scattered, and showed no connection. 1 case occurred at a dairy farm. The patient was removed to hospital on the second day of illness, and here again no extension of the disease occurred. Another case was imported from the City of Glasgow.

*Stonehouse*.—4 cases; 2 deaths. 2 cases, a mother and child, developed diphtheria in one family, and infection was traced to a maid who had suffered from sore throat, a swab from whom gave a positive result. The child died on the fourth day of illness.

The second death, that of a child aged 1 2/12 years, was in a case of laryngeal diphtheria; the child had been ill for 8 days, and was not removed to hospital.

*Blantyre*.—27 cases; 1 death. The cases were distributed as follows:—Auchentiber, 1; Caldervale, 2; High Blantyre, 5; Low Blantyre, 5; Stonefield, 14.

*Bothwell*.—131 cases occurred in 119 families, with 10 deaths. The cases were distributed as follows:—Bellshill, 44; Bothwell, 3; Bothwellhaugh, 3; Carfin, 8; Carnbroe, 2; Chapelhall, 3; Holytown, 3; Mossend, 11; Nackerty, 5; Newarthill, 1; Newlands, 6; New Stevenston, 12; Tannochside, 7; Uddingston, 23.

*Cambuslang*.—68 cases occurred in 56 families, with 6 deaths. The cases were distributed as follows:—Cambuslang, 41; Dalton, 1; Halfway, 15; Hallside, 1; Newton, 7; Westburn, 3.

There was a small outbreak of diphtheria (7 cases) in Halfway during the month of March, when the spread of infection was apparently due to school contact.

*Cambusnethan*.—21 cases in 17 families, with no deaths. The cases were distributed as follows:—Allanton, 4; Clydesdale, 1; Newmains, 2; Netherton, 3; Overtown, 5; Stane, 3; Waterloo, 3.

The 4 cases at Allanton occurred in the one family, and the source of infection was thought to be in Carluke, where one of the cases had been visiting.

*Dalserf*.—38 cases in 34 families, with 4 deaths. The cases were distributed as follows:—Ashgill, 1; Cornsillock, 1; Larkhall, 35; Swinhill, 1.

*Dalziel*.—5 cases occurred in 5 families, with no deaths.

*Hamilton*.—6 cases occurred in 6 families, with no deaths. The cases were distributed as follows:—Cadzow, 4; Eddlewood, 1; Home Farm Rows, 1.

*New Monkland*.—14 cases occurred in 12 families, with 1 death. The cases were distributed as follows:—Airdrie, 3; Caldercruix, 3; Glenboig, 2; Riggend, 1; Whiterigg, 5.

*Old Monkland*.—29 cases occurred in 26 families, with no deaths. The cases were distributed as follows:—Baillieston, 5; Broomhouse, 1; Calderbank, 2; Carmyle, 3; Coatbridge, 1; Easterhouse, 2; Gartsherrie, 1; Mount Vernon, 8; Rosepark, 1; Tollcross, 5.

*Shotts*.—39 cases occurred in 30 families, with 3 deaths. The cases were distributed as follows:—Caldercruix, 1; Cleland, 1; Dykehead, 11; Harthill, 23; Hartwood, 3.



TABLE D3.— SCARLET FEVER.

YEAR.	NUMBERS.		RATES.		
	Cases Notified.	Deaths Registered.	Deaths per 100 Cases.	Cases per 1,000 Population.	Deaths per 10,000 Population.
(1)	(2)	(3)	(4)	(5)	(6)
<i>Average,</i> 1891-95.	1,116	34	3.06	7.42	2.2
<i>Average,</i> 1896-1900.	1,035	41	3.98	6.13	2.4
<i>Average,</i> 1901-05.	645	25	3.90	3.44	1.3
<i>Average,</i> 1906-10.	927	24	2.54	4.67	1.1
1911	1,057	22	2.08	5.22	1.0
1912	1,254	29	2.31	6.16	1.4
1913	1,089	27	2.47	5.21	1.3
1914	1,455	41	2.81	6.96	1.9
1915	1,039	26	2.50	4.97	1.2
<i>Average,</i>	1,179	29	2.43	5.70	1.3
1916	1,360	33	2.42	6.50	1.5
1917	762	23	3.01	3.59	1.0
1918	359	15	4.17	1.69	0.7
1919	817	19	2.32	3.80	0.8
1920	1,349	15	1.11	6.24	0.6
<i>Average,</i>	929	21	2.61	4.86	0.9

**Scarlet Fever.**

Cases, 1,349; deaths, 15; fatality, 1.11 per cent.

Table D3 shows the prevalence of Scarlet Fever since 1891. The incidence of the disease shows a considerable increase compared

with the previous three years, but it is satisfactory to note that the fatality rate is the lowest yet recorded.

The monthly distribution throughout the year was as follows:—

Jan.	Feb.	Mar.	Apl.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total.
136	95	88	62	75	49	68	109	122	190	175	180	1,349

The age-incidence of the cases and deaths was:—

Ages,	-1	1-5	1-15	15-25	25-45	45-65	65+	All ages.
Cases,	7	260	947	109	22	4	—	1,349
Deaths,	1	10	3	—	1	—	—	15

The number of cases removed to hospital was 1,225, being 91 per cent. of the total notified.

In the course of the year 31 cases occurred on dairy farms distributed in the parishes as follows:—Avondale, 11; Glasford, 1; Blantyre, 2; Cambuslang, 1; Cambusnethan, 1; Dalsersf, 1; Hamilton, 12; Shotts, 2. All the cases were removed to hospital immediately notification was received, precautions taken against the spread of the disease, and in no instance did the milk supply become infected.

RETURN CASES.—1,229 cases were discharged from Hospital, and of these 18 gave rise to 19 return cases, while several others were suspected of giving rise to some other return cases.

	Motherwell.	Lightburn.	Total.
Number of cases discharged,	- 985	244	1,229
Number of infectious cases,	- 17	1	18
Number of persons infected,	- 18	1	19
Infectivity rate,	- - - 1·7	0·4	1·4

Of the 18 cases giving rise to return cases it was found that 7 developed a discharging nose soon after their return home. 2 developed a discharging ear, while in 10 cases there was apparently nothing abnormal.

The interval which elapsed between the discharge of the infecting cases and the onset of illness in the return cases is given below:—

1 week.	1-2 weeks.	2-3 weeks.
10	7	2

The distribution of the cases and deaths according to parish was as follows:—

*Avondale*.—35 cases; no deaths.

*East Kilbride*.—9 cases; no deaths.

*Glasford*.—5 cases; no deaths.

*Stonehouse*.—3 cases; no deaths.

*Blantyre*.—130 cases; 3 deaths. The cases were distributed as follows :—High Blantyre, 32; Larkfield, 5; Low Blantyre, 10; Stonefield, 83.

*Bothwell*.—453 cases; 4 deaths. The cases were distributed as follows :—Bellshill, 208; Bothwell, 19; Bothwellhaugh, 13; Carfin, 15; Carnbroe, 7; Chapelhall, 3; Holytown, 11; Mossend, 61; Nackerty, 1; New Stevenston, 40; Newarthill, 4; Newlands, 2; Tannochside, 12; Uddingston, 57.

*Cambuslang*.—74 cases; 1 death. The cases were distributed as follows :—Cambuslang, 58; Hallside, 3; Halfway, 8; Newton, 5.

*Cambusnethan*.—105 cases; 3 deaths. The cases were distributed as follows :—Chapel, 5; Morningside, 3; Netherton, 7; Newmains, 30; Overtown, 8; Stane, 35; Waterloo, 17.

*Dalserf*.—36 cases; no deaths. The cases were distributed as follows :—Birkenshaw, 1; Dalserf, 1; Larkhall, 34.

*Dalziel*.—10 cases; no deaths.

*Hamilton*.—130 cases; no deaths. The cases were distributed as follows :—Cadzow, 11; Eddlewood, 17; Ferniegair, 50; Hamilton, 1; Limekilnburn, 4; Meikle Earnock, 12; Quarter, 31; Udston, 4.

*New Monkland*.—38 cases; 1 death. The cases were distributed as follows :—Airdrie, 2; Caldercruix, 6; Cleddans, 1; Darngavil, 1; Glenboig, 3; Glenmavis, 5; Greengairs, 2; Longriggend, 1; Luggiebank, 1; Meikledrumgray, 1; Plains, 2; Riggend, 1; Stanrigg, 1; Whiterigg, 11.

*Old Monkland*.—95 cases; 2 deaths. The cases were distributed as follows :—Baillieston, 22; Bargeddie, 2; Broomhouse, 1; Calderbank, 4; Carmyle, 18; Douglas Support, 2; Drumpark, 1; Easterhouse, 8; Gartsherrie, 1; Hillhead, 2; Mount Vernon, 6; Rosepark, 8; Swinton, 7; Tolleross, 13.

*Shotts*.—226 cases; 1 death. The cases were distributed as follows :—Blackridge, 1; Cleland, 13; Dykehead, 129; Gartness, 2; Harthill, 74; Hartwood, 5; Salsburgh, 2.

### **Typhus Fever.**

No cases of this disease occurred.

### **Typhoid Fever.**

Cases notified, 63; deaths, 6; fatality, 9·51 per cent.

The number of cases removed to hospital was 57, or 90 per cent. of the total. Table D4 shows the prevalence since 1891.

TABLE D4.—TYPHOID FEVER.

YEAR.	NUMBERS.		RATES.		
	Cases Notified.	Deaths Registered.	Deaths per 100 Cases.	Cases per 1,000 Population.	Deaths per 10,000 Population.
(1)	(2)	(3)	(4)	(5)	(6)
<i>Average, 1891-95.</i>	465	56	11.95	3.0	4.2
<i>Average, 1896-1900.</i>	350	45	12.73	2.0	2.6
<i>Average, 1901-05.</i>	294	40	13.54	1.5	2.1
<i>Average, 1906-10.</i>	206	19	9.40	1.0	0.9
<i>Average, 1911-15.</i>	111	13	11.09	0.5	0.5
1916	73	13	17.81	0.3	0.6
1917	86	11	12.79	0.4	0.5
1918	108	14	12.96	0.5	0.6
1919	103	11	10.63	0.4	0.5
1920	63	6	9.5	0.2	0.2
<i>Average,</i>	86	11	12.74	0.3	0.5

The age incidence of cases and deaths is shown below :—

	Ages,	-1	-1.5	5-15	15-25	25-45	45-65	65+	All ages
Cases, -	-	1	4	26	12	17	2	1	63
Deaths,	-	—	—	2	2	2	—	—	6

The number of cases notified during the year is the lowest yet recorded, and the fatality rate is also low. The monthly reports show that the cases did not occur with undue prevalence at any particular season of the year—the highest number, viz., 9, occurred in

May—and also that the number was very low in each parish, with the exception of Dalserf and New Monkland, in which 25 and 9 cases occurred respectively.

The chief factor in promoting the spread of disease was personal contact, especially contact with mild cases, the true nature of which so often remains unrecognised until the occurrence of a subsequent case of definite clinical type. The tracing of such unrecognised cases—often rendered difficult by unwillingness on the part of relatives to give a full history of recent illness in the household—is very greatly facilitated by examination of the blood of all contacts for the agglutination reaction, and such laboratory examinations have become practically a routine measure in investigating every case. In a number of instances where such results were positive, and especially where the housing conditions were unsatisfactory, the “positive contacts” were removed to hospital for observation and for bacteriological examination of the excreta. Such examinations were also carried out in the case of the “positive contacts” allowed to remain at home, and although examination did not in any instance reveal the presence of *B. typhosus* the contacts were regarded as potential sources of infection, and were carefully instructed as to the disposal of excreta.

There was no evidence that infection was carried to any case by means of food, milk, or water.

A short account is given below of the cases as they occurred in each parish:—

*Avondale*.—5 cases; no deaths. The first case, a girl aged 4, was infected by a brother who resided in Larkhall; she gave rise to 2 secondary cases. In the 2 other cases the diagnosis of typhoid fever was not verified after admission to hospital, though the blood reaction in each instance was positive. One of the patients, a discharged soldier, was found to be suffering from pneumonia, and the “positive” result of the blood examination was no doubt due to acquired immunity from inoculation while in the army.

*East Kilbride*.—1 case, probably infected in Larkhall.

*Glasford*.—1 case, infected by one of the Avondale patients.

*Stonehouse*.—No cases.

*Blantyre*.—4 cases; no deaths. 1 case was due to infection from a previous “missed” case, and one was secondary. The source of infection in the third case could not be traced, while in the fourth the diagnosis was not verified.



*Bothwell*.—7 cases; 1 death. The cases were distributed as follows:—Bothwell, 1; Mossend, 1; New Stevenston, 2; Tannochside, 2; Uddingston, 1. One of the New Stevenston cases was secondary to a “missed” case; in one of the Tannochside cases the infection was imported from outwith the County; while the patient notified from Uddingston proved to be suffering from pneumonia. In the other 4 cases no association with a previous case could be detected.

*Cambuslang*.—2 cases; no deaths. One of the cases proved not to be suffering from typhoid fever, and in the other case infection could not be traced.

*Cambusnethan*.—One case occurred. The infection was imported from Yorkshire.

*Dalserf*.—25 cases; 3 deaths. All the cases occurred in Larkhall, 14 families being involved. 14 of the patients were over 12 years of age, and of those 2 died; 11 were under 12 years of age, and 1 died. 8 other persons were sent to hospital, thought to be suffering from typhoid fever, but after admission the diagnosis had to be revised. In 3 of these the agglutination reaction was positive, but there were no clinical symptoms, and in the other 5 cases the patients were found to be suffering from other diseases of malignant, tuberculous, and doubtful nature. In the examination of contacts 5 were noted to give a positive response to the agglutination test, but, there being no other indications for their isolation, they were not removed to hospital. Half of the persons attacked resided in the Meadowhill District, where the overcrowded and insanitary conditions are conducive to the spread of the disease. In this area the reluctance of the people not only to seek medical advice but also to go to hospital when necessary no doubt tends to keep the disease alive. Thus one patient was removed to hospital only at the end of the seventh week of her illness, she and her relatives even then protesting against removal. There are grounds for believing that all but one of the cases which occurred in Dalserf were infected locally. The exception, a miner, was considered to have contracted the disease in Glasgow, where he had resided before coming to Larkhall. He sickened a few days after leaving Glasgow, and, the Medical Officer of Health of the City having been informed of this, a visit was made to the house which the patient had left, when it was found to contain an adult suffering from typhoid fever. This was the first case in the parish for the year in question, and seemed to have no causal connection with the subsequent cases, which commenced in Meadowhill, and from which infection appeared to extend.

*Dalziel*.—2 cases; no deaths. One was infected outwith the district while on holiday, while the other was due probably to a "missed" case.

*Hamilton*.—2 cases. One proved not to be typhoid fever, while the diagnosis in the other was doubtful.

*New Monkland*.—9 cases; 1 death. All the cases occurred in Glenboig, in three families residing in contiguous one-apartment houses in a single-storey row. There were 4 cases in each of two of the families, and 1 in the third. The first recognised case, a boy, J. R., aged 7 years, who sickened on 22nd April, and who was thought for a time to be suffering from influenza, was notified on 12th May, and removed to hospital the same day. On 18th May a sister, M. R., aged 14 years, who had sickened on 10th May, was also removed. When these cases were investigated it was stated by the relatives that there was no other illness in the family, but it subsequently transpired that two of the other inmates, a sister, J. R., aged 16 years, and a lodger, F. H., aged 38 years, had been out of sorts since 3rd May and 5th May, but had continued at their employment as brickmakers until 23rd May and 21st May respectively. Both these cases were removed to hospital on 25th May. It was also found that another sister, A. R., aged 8 years, had had an illness, regarded throughout as influenza, which began on 23rd March, and which lasted for about 6 weeks. Even by the middle of May, when seen by the Assistant Medical Officer of Health, this child was not looking well, and a specimen of blood taken from her gave a positive agglutination reaction. The source of infection in her case could not be traced, but there is no doubt that the supposed influenza from which she suffered was in reality typhoid fever, and that she was the source from which subsequent cases originated. Specimens of her excreta were examined at the County Laboratory, but the results of the examination were negative, and it was not thought necessary to have her removed to hospital.

In addition to the above cases the disease also manifested itself in the families residing one on either side of the originally infected household, one family having 1 case, J. R., aged 38 years, who sickened on 12th May, and the other having 4 cases, who sickened on 14th May, 16th May, 6th June, and 26th June respectively, the patients being the mother, a child, and two lodgers. The death which occurred was in this family, the mother dying on 18th June.

The three families were on very friendly terms with one another, and inter-visitation was practically a daily occurrence. Infection

was spread in this way, and its dissemination was also encouraged owing to the method by which the removal of excreta was supposed to be effected. A description of the method is worthy of note.

The row consists of single-apartment dwellings. In front of the row is a brick-laid footpath about 5 feet broad, along the outer border of which is a shallow surface channel, which has very little fall, and which opens into an underground drain at one end of the row. Immediately beyond the surface channel the ground rises rather abruptly, and on this sloping ground, opposite No. 5, where the first cases occurred, and about 20 yards distant therefrom, there was a large ashpit, with attached dry closets. Into this ashpit the patients' excreta were deposited. To carry off urine and other liquids from the ashpit a drain was led underground, with a rapid fall direct to the previously-mentioned surface channel, which it joined almost opposite to No. 5. The liquid coming through this drain, with its rapid fall, readily overflowed the margin of the channel and found its way on to the footpath immediately in front of the house, thus being returned practically to its point of origin, and fouling with infected sewage the entrance to the houses. The attention of the proprietors of the property was drawn to the state of affairs just described, with the result that the ashpit and closets were demolished altogether, and means of disposal—still crude, but comparatively safe—provided elsewhere.

*Old Monkland.*—2 cases; 1 death. One case was secondary to one which occurred in December, 1919, infection taking place through the medium of a dry closet, badly kept, and used in common by the two families. The case which ended fatally was infected in a fever hospital outwith the County.

*Shotts.*—2 cases; no deaths. In one case the source of infection could not be traced, while in the other the patient proved to be suffering from influenza.

### **Cerebro-Spinal Fever or Meningitis.**

During the year 22 cases were notified.

Tables B and E show the prevalence of cerebro-spinal fever in each parish, and Table D5 shows the annual prevalence of the disease since 1906.

Of the 22 cases notified the diagnosis was verified in 12, in all of which the cerebro-spinal fluid was examined and found positive.

No association was found between any of the cases.

TABLE D5.—CEREBRO-SPINAL FEVER.

YEAR.	NUMBERS.		RATES.		
	Cases Notified.	Deaths Registered.	Deaths per 100 Cases.	Cases per 1,000 Population.	Deaths per 10,000 Population.
(1)	(2)	(3)	(4)	(5)	(6)
1906	33	25	75·7	0·16	1·28
1907	175	135	77·1	0·88	6·85
1908	104	70	67·3	0·52	3·53
1909	12	5	41·6	0·06	0·25
1910	9	6	66·6	0·04	0·29
<i>Average,</i>	<i>66</i>	<i>48</i>	<i>72·3</i>	<i>0·33</i>	<i>2·42</i>
1911	8	3	37·5	0·03	0·14
1912	4	3	75·0	0·01	0·14
1913	13	6	46·1	0·06	0·28
1914	8	3	37·5	0·03	0·14
1915	15	4	26·6	0·07	0·19
<i>Average,</i>	<i>9</i>	<i>4</i>	<i>44·5</i>	<i>0·04</i>	<i>0·18</i>
1916	14	4	28·5	0·06	0·19
1917	19	12	63·1	0·08	0·56
1918	13	3	23·0	0·06	0·14
1919	18	7	38·8	0·08	0·32
1920	22	14	63·6	0·10	0·64
<i>Average,</i>	<i>17</i>	<i>8</i>	<i>43·4</i>	<i>0·07</i>	<i>0·37</i>

**Puerperal Fever.**

The number of cases notified was 61, and 23 deaths were registered.

This disease is dealt with more fully in the Maternity and Child Welfare Section of the Report.

**Erysipelas.**

175 cases were notified, and 6 deaths registered.



### Tuberculosis.

*Mortality*—The deaths which occurred from all forms of tuberculosis numbered 264, viz.:—Pulmonary, 161; meningeal, 47; abdominal, 30; and other forms, 26. In the following table the deaths from each form are classified in age periods:—

	Ages,									Total.
	-1	1-5	5-10	10-15	15-25	25-35	35-45	45-65	65 and over.	
Pulmonary, -	3	9	2	6	37	37	35	26	6	161
Meningeal, -	18	21	3	3	1	1	—	—	—	47
Abdominal, -	5	11	4	4	1	2	2	1	—	30
Other forms, -	3	5	3	3	6	2	2	2	—	26
Total, -	29	46	12	16	45	42	39	29	6	264

*Death-rates.*—The death-rates per 10,000 of the population were:—Pulmonary, 7·4; meningeal, 2·1; abdominal, 1·4; others, 1·2. The corresponding average annual death-rates for the previous six years, 1914-1919, were 7·4, 2·4, 2·1, and 1·2.

In the following pages information relative to both pulmonary and non-pulmonary tuberculosis is given, and so far as possible statistics common to both forms are given in combined tables.

*Notification.*—There were on record at the beginning of the year 821 cases of pulmonary and 813 cases of non-pulmonary forms of the disease, and during the year 355 new cases of the former type and 370 new cases of the latter were brought to notice, giving a total of 1,176 and 1,183 cases respectively. The following tabular statement shows the new cases relative to notification:—

	Pulmonary.	Non-Pulmonary.
New cases notified, - - - -	269	298
„ „ not notified, - - - -	86	72
	<u>355</u>	<u>370</u>

Of the cases on record at the beginning of the year, 146 pulmonary and 183 non-pulmonary were re-notified during the course of the year.



The new cases were dealt with as follows :—

	Pulmonary.	Non-Pulmonary.
Admitted to Sanatorium, - - -	157	135
Refused to go to Sanatorium, - -	80	87
Died before or soon after notification, -	63	86
Inmates of asylums, &c., - - -	20	2
Visitors or left district, - - -	16	1
Unsuitable for institutional treatment, -	10	40
Waiting treatment towards end of year,	9	19
	<hr/>	<hr/>
	355	370
	<hr/>	<hr/>

*Types of Non-Pulmonary Cases.*—The 370 new cases are classified in the following statement according to the localisation of the principal lesion present at the time of notification :—

Cervical glands, - - -	149	Special Organs—	
Abdominal, - - -	83	Eyes, 2; kidney, 2;	
Bones and Joints, - - -	49	bladder, 3; testicle, 1,	8
Meninges, - - -	47	Skin, - - - -	4
Spine, - - - -	18	Subcutaneous tissue, -	3
General, - - - -	9		
			<hr/>
			370
			<hr/>

*Distribution throughout District.*—The parishes of residence are given in Table E, page 11.

*Age and Occupation.*—The cases are classified below according to certain age and occupation groups:—

Ages,	-1	1-5	5-10	10-15	15-25	25-35	35-45	45-55	55-65	65+	Total.
Pulmonary,	-	4	14	41	26	82	88	49	31	11	9 355
Non-Pulmonary,	35	85	112	55	49	21	5	6	2	—	370

OCCUPATIONS.	Pulmonary.	Non-Pulmonary.
<i>Domestic Work</i> —		
P.—Housewives, 67; Domestic, 5,	- - 72	—
N.P.— „ 13; „ 8,	- - —	21
<i>Children</i> —		
P.—18; N.P.—134,	- - - - 18	134
<i>Scholars</i> —		
P.—67; N.P.—150,	- - - - 67	150
<i>Miners, &amp;c.</i> —		
P.—Miners, 51; Pithead Workers, 2;	- - 53	—
N.P.—Miners, 17; Firemen, 3,	- - - —	20
<i>Metal Workers</i> —		
P.—Steelworkers, 15; Ironworkers, 3;		
Labourers, 6, Engineers, 2;	- - 26	—
N.P.—Steelworkers, 3; Stocktaker, 1,	- - —	4
<i>Factory and Workshop Employees</i> —		
P.—Bakers, 3; Printer, 1; Tailor, 1; Wagon-		
builder, 1; Dressmakers, 3; Cork-		
cutter, 1; Shoemaker, 1; Sawmiller, 1,	12	—
N.P.—Millworkers, 6; Tailor, 1; Dress-		
maker, 1; Machinist, 1, - - -	—	9
<i>Shopkeepers</i> —		
P.—Barmen, 3; Grocers, 3; Tobacconist, 1;		
Others, 4, - - - - -	11	—
N.P.—Others, 4, - - - - -	—	4
<i>Stone or Brick Workers</i> —		
P.—Masons, 2; Bricklayers, 2,	- - - 4	—
<i>Miscellaneous</i> —		
P.—44; N.P.—7,	- - - - 44	7
<i>No Occupation</i> —		
P.—21; N.P.—13,	- - - - 21	13
<i>Indefinite</i> —		
P.—27; N.P.—8,	- - - - 27	8
	<u>355</u>	<u>370</u>

“P.”=Pulmonary.

“N.P.”=Non-Pulmonary.

*Duration of Illness.*—The duration of illness according to patients' own estimate at time of notification was as follows (in 49 of the pulmonary cases the duration is not recorded):—

Months,	- 1	1-2	2-3	3-6	6-9	9-12	12-18	18-24	24 and over.	Total
Pulmonary,	13	20	14	42	30	10	33	12	132	306
Non-Pulmonary,	61	36	30	41	18	21	25	16	88	370

While the above table is probably of doubtful value in showing the number of cases where early notification was received, owing to the well-known tendency of patients to date the beginning of illness from some acute exacerbation of the disease or from the time when they were compelled to cease work, it is of value in demonstrating the large numbers which remain unnotified for a very considerable period after the onset of symptoms.

*Earliest Manifestation of Disease.*—In the pulmonary cases the earliest manifestations of illness were as follows:—Cough or spit, 123; pain or pleurisy, 40; "chill," 37; pneumonia, 30; influenza, 28; wasting, 18; measles, 11; gassing, 8; hæmoptysis, 5; gastro-intestinal disturbance, 5; lassitude, 4; injury to chest, 2; abscess of rib, 2; whooping-cough, 1; headache, 1; anæmia, 1; unknown (including 14 asylum cases), 39.

*Home Conditions.*—The following tables show the number of apartments and types of houses occupied by the patients and their families:—

*Pulmonary Cases.*—

Apartments.	Tenement.	Cottages.	Row.	Institutions.	Total.
1	36	9	44	—	89
2	85	14	47	—	146
3	23	12	9	—	44
4	4	7	1	—	12
Over 4	1	16	—	20	37
					—
					328

Of the 328 cases recorded, 89 resided in houses of a single apartment, 146 of 2 apartments, 44 of 3 apartments, and 29 of 4 or more apartments, while 20 were institution cases. The total number of

persons in each class of houses, with the average number per house and per room, were :—

Apartments.	1	2	3	4 and over.
Total inmates, - - -	410	886	281	161
Average number per house,	4·6	6·09	6·4	5·6
„ „ per room,	4·6	3·04	2·1	under 1·4

*Non-Pulmonary Cases.*—

Apartments.	Tenement.	Cottages.	Row.	Institutions.	Total.
1	29	8	50	—	87
2	113	19	70	—	204
3	9	8	10	—	27
4	5	5	2	—	12
Over 4	3	7	1	—	11
					<hr/> 341 <hr/>

Apartments.	1	2	3	4 and over.
Total inmates, - - -	437	1,327	183	147
Average number per house,	5	6·5	6·8	6·4
„ „ per room,	5	3·25	2·3	under 1·6

It will be seen from the above figures that in a great many cases it was quite impossible for the patient to have a room to himself, and in a large proportion even the use of a separate bed could not be obtained. When the patient did have a bed for his own use it was too frequently provided at the expense of overcrowding the other inmates.

It is to be noted that in all the sizes and types of dwellings the average number of occupants, both per house and per room, was greater in the non-pulmonary than in the pulmonary cases.

When a case was removed to sanatorium attempts were frequently made both by the relatives and by the staff to obtain some improvement in the home conditions in anticipation of the patient's return, but owing to the general shortage of houses such attempts were usually unsuccessful, and the patient had of necessity to return home to live under conditions where the improvement in health conferred by open-air treatment could not be maintained.

*Institutional Treatment.*—The following table shows the total number of all cases admitted and re-admitted to tuberculosis institutions. No case was sent to any institution outwith the County :—

Cases.	SANATORIA.				HOSPITALS.		Total.
	Shotts.	Stonehouse.	Uppertown.	Motherwell.	Lightburn.	Hairmyres.	
Pulmonary,	92	12	86	1	3	109	303
Non-Pulmonary,	16	78	27	94	7	53	275
	108	90	113	95	10	162	578



*Deaths.*—161 pulmonary cases and 103 non-pulmonary cases died. Of these 81 and 60 respectively were of cases notified during the year.

The pulmonary death-rate for 1920 was 7·4 per 10,000 of the population, and the non-pulmonary 4·7. The mortality for pulmonary forms is given in the following table, which shows the average annual death-rate per 10,000 of the population since 1891:—

PULMONARY TUBERCULOSIS IN EACH REGISTRATION DISTRICT OF THE MIDDLE WARD.—AVERAGE ANNUAL NUMBER OF DEATHS FOR QUINQUENNIAL PERIODS 1891-1915, AND FOR THE YEARS 1916, 1917, 1918, 1919, AND 1920.

Registration District.	Population. Census 1911.	1891-1895.	1896-1900.	1901-1905.	1906-1910.	1911-1915.	1916.	1917.	1918.	1919.	1920.
Avondale, -	5,033	10·2	7·4	5	7	4	5	4	2	3	4
East Kilbride, -	3,977	4·6	6·2	5·8	5·8	4·2	1	8	6	7	2
Glasford, -	1,312	1·4	·8	1·2	1·2	3	—	1	1	1	—
Stonehouse, -	3,688	4·8	6·8	4·2	2	2·4	6	1	1	2	2
Blantyre, -	16,821	18·2	17·6	22·2	15·6	19·3	15	18	17	13	18
Bothwell, -	18,956	18	14·6	17·8	14	15·3	12	19	15	15	15
Bellshill, -	18,638	10·6	18	13·6	15·4	16	23	17	16	18	21
Holytown, -	16,617	13·4	11·4	13·4	16·8	13	12	11	24	8	16
Cambuslang, -	24,864	28·4	25·4	27	19·4	24·1	23	25	31	17	24
Cambusnethan, -	11,585	13·8	7·4	9·2	9·4	11·1	9	6	7	6	12
Calderhead, -	2,991	2·2	2·8	2·8	2·6	1·4	—	4	5	8	3
Dalserf, -	4,427	3·8	1·8	4·2	2·6	2·2	2	4	—	5	—
Larkhall, -	14,202	12	14·2	12·6	7·4	7·3	5	4	14	6	10
Dalziel, -	1,876	1·8	1·2	2·4	2·4	1·2	3	—	—	—	1
Hamilton, -	7,775	11	6·8	6	6·8	5·2	4	2	5	6	1
New Monkland, -	13,728	14·6	18·2	11·6	14·2	9·2	8	14	4	6	7
Old Monkland—											
East, -	2,496	2·2	1·2	1·8	2	2	—	1	4	3	1
Coatbridge, -	2,772	2·8	2·6	1·8	2·6	2·3	2	—	1	4	2
West, -	12,472	15·6	12	9·8	11·2	10·4	15	11	5	4	6
Shotts—											
East, -	3,690	2·8	2·8	1·8	3	3	2	—	3	1	9
Middle, -	3,270	1·2	1·6	1·6	2·2	1·1	3	1	1	—	—
Calderhead, -	5,680	3	4·2	5·2	5·4	4·2	6	2	5	9	5
West, -	4,559	4·6	5·8	4·8	4·6	3·1	5	3	2	3	2
North, -	1,234	2·2	2·2	1·8	1·6	1·3	—	2	5	1	—
TOTAL, -	202,663	203·2	193·0	187·6	175·0	168·1	166	158	174	146	161
Average Quinquennial Death-rate per 10,000 of Population -	-	13·57	11·44	10·0	8·83	8·16	7·94	7·45	8·20	6·79	7·45

*Deaths in relation to Notification.*—The table given below shows the deaths classified according to the time which elapsed between the receipt of notification and the occurrence of death, and also the deaths of unnotified cases :—

Year.	Total Cases.	Fatal Cases.		Fatal Cases Notified—Period between Notification and Death.				
		Unnotified.	Notified.	1 Month.	1-3 Months.	3-6 Months.	6-12 Months.	Over 1 Year.
1908	301	43	141	40	36	21	18	26
1909	338	52	155	36	33	27	25	34
1910	370	30	131	34	30	16	22	29
1911	336	24	161	31	30	20	29	51
1912	365	22	138	30	20	26	19	43
1913	369	26	150	35	27	30	31	27
1914	274	16	123	21	21	17	17	47
1915	327	20	144	32	21	16	25	50
1916	340	17	149	32	25	20	22	50
1917	289	31	127	20	18	18	23	48
1918	395	50	124	29	22	17	16	40
1919	366	21	125	29	23	21	21	31
1920	355	17	144	43	19	19	21	42

The proportion of cases notified only a few months before death remains high.

Of the total number of 1,176 pulmonary and 1,183 non-pulmonary cases dealt with throughout the year the following table shows the changes which took place :—

	Cases in District on 1/1/20.	New Cases.	Total on Register.	Left District.	Died.	* Off list. Disease arrested or diagnosis revised.	Cases in District on 31/12/20.
Pulmonary,	821	355	1,176	67	180*	71	858
Non-Pulmonary,	813	370	1,183	45	117*	122	899
	1,634	725	2,359	112	297*	193	1,757

\* 19 pulmonary and 14 non-pulmonary cases died from some cause certified to be other than tuberculosis.

*Duration of Illness at Death.*—The table given below shows the fatal cases classified according to the total duration of illness:—

Duration.	MONTHS.								YEARS.				Un-known.
	1-3	3-6	6-12	1-2	2-3	3-4	4-5	5-6	6-7	7-8	8-9	9-10	10
Pulmonary, - -	14	16	20	27	23	17	12	6	3	2	1	3	5
Non-Pulmonary, -	39	14	13	9	4	1	4	1	—	1	—	1	—

*Family History of Tuberculosis.*—Of the 355 pulmonary cases and the 370 non-pulmonary cases brought to notice during the year a family history of tuberculosis was obtained, as follows:—

	Cases with Tuberculosis in other members of family.	Cases with Tuberculosis in other relatives.	Percentage of cases with positive family history.
Pulmonary, - - -	69	29	27·6
Non-Pulmonary, - -	83	31	30·8

*Domiciliary and Dispensary Treatment.*—Cases suitable for treatment at home, or who could not for any reason receive institutional treatment, were kept under observation by the Tuberculosis Officers and Nurse Inspectors, the latter of whom paid 9,525 visits during the course of the year. Patients remaining at home were encouraged to attend at the Tuberculosis Dispensaries, where they were kept under careful observation, had their weights recorded, and received medical examination from time to time. Five dispensaries—situated at Bellshill, Blantyre, Cambuslang, Larkhall, and Shotts—were in use, and the table below gives a record of the attendances:—

	New Cases.	Re-Visits.
*Bellshill, - - - - -	46	25
Blantyre, - - - - -	123	267
Cambuslang, - - - - -	137	667
Larkhall, - - - - -	60	139
Shotts, - - - - -	124	334
	<hr/> 490	<hr/> 1,432

During the year 132 cases received additional nourishment in the form of milk, eggs, butcher meat, and butter, at a total cost of £978 9s. In addition, supplies of malt and cod liver oil were provided for those and other cases.

*Discharged Tuberculous Soldiers.*—Among the cases notified for the first time during 1920 there were 64 discharged soldiers, 62 of

whom were suffering from pulmonary and 2 from non-pulmonary forms of the disease. The relationship of the disease to military service may be summarised, according to the Ministry of Pensions, thus:—Attributable to service, 22; aggravated by service, 4; non-attributable, 10; undecided, 28.

Institutional treatment—in sanatorium or farm colony—was given to 37 cases, while in 19 instances such treatment was offered but refused; 4 cases were considered unsuitable for admission to institution, 2 were resident only temporarily in the District, and 2 died a very short time after notification was received.

The total number of ex-service men dealt with throughout the year as suffering from tuberculosis was 192. In addition to domiciliary visits made to those cases by the Tuberculosis Officers and attendances made by the men at dispensaries, 521 home visits were made by the Nurse Inspectors—*i.e.*, 5·4 per cent. of the total visits paid by them.

*Institutional Treatment.*—The work at the various institutions dealing with cases of tuberculosis is described by the respective Physician-Superintendents in the institutional reports.

#### **Refractories Industries (Silicosis) Scheme, 1919.**

9 examinations (6 males and 3 females) were carried out at the Birkenshaw Brick Work, Larkhall, and careful records were made of the conditions found. This is the only work in the Middle Ward area which comes under the scheme.

#### **Ophthalmia Neonatorum.**

89 cases were notified.

This disease is dealt with in the Maternity and Child Welfare Section of the Report.

#### **Acute Poliomyelitis or Infantile Paralysis.**

2 cases were notified.

#### **Tetanus, Anthrax, Glanders, and Actinomycosis.**

No notifications of any of these diseases were received.

#### **Pneumonia.**

Cases, 472; deaths, 272.

Acute primary pneumonia and influenzal pneumonia were added to the list of compulsorily notifiable diseases by an Order of the Board of Health which came into force on 1st August, 1919.



*Mortality.*—Since 1911 deaths from pneumonia have been classified separately, and the following table shows the annual number of deaths and the death-rate per 1,000 of the population since that year. It is satisfactory to note that the death-rate for 1920 is the lowest recorded.

	Year—1911	1912	1913	1914	1915	1916	1917	1918	1919	1920
Deaths,	311	343	240	288	355	268	277	350	308	272
Death Rate,	1.52	1.68	1.59	1.32	1.69	1.28	1.30	1.65	1.43	1.24

The cases notified numbered 382, and of those 182 died. In addition, 90 deaths took place of cases which had not previously been notified, so that the total number of known cases and registered deaths amounted to 472 and 272 respectively. As so many deaths took place where no previous notification had been received, there is no doubt that many non-fatal cases also occurred, which likewise escaped notification, and in the tables which follow this should be kept in view.

The notified cases were described on the notification forms as follows:—Pneumonia, 149; lobar pneumonia, 62; primary pneumonia, 52; influenzal pneumonia, 29; acute primary pneumonia, 25; acute lobar pneumonia, 24; acute pneumonia, 22; broncho pneumonia, 8; pleuro pneumonia, 6; acute broncho pneumonia, 3; primary lobar pneumonia, 2; total, 382.

The distribution of notified cases and of deaths according to parish was as follows:—

Parish.	Cases.	Deaths.	Parish.	Cases.	Deaths.
Avondale, -	1	5	Dalziel, - -	1	—
East Kilbride,	1	2	Hamilton, -	16	9
Glasford, -	1	1	New Monkland,	16	15
Stonehouse, -	82	4	Old Monkland, -	36	23
Blantyre, -	87	35	Shotts, - -	20	11
Bothwell, -	173	94		—	—
Cambuslang, -	77	42	Total, -	472	272
Cambusnethan,	20	4		—	—
Dalserf, -	21	27			

The following tabular statement shows the distribution throughout the year:—

Month—	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total.
Cases, -	31	21	48	54	44	41	12	13	9	20	43	136	472
Deaths, -	27	17	34	36	26	18	9	8	13	7	29	48	272

The cases notified and deaths are given below according to certain age periods:—

		All ages.	-1	1-5	5-15	15-25	25-45	45-65	65 and over.
Cases	(Primary Pneumonia, -	443	67	93	105	59	71	39	9
	(Influenzal „ -	29	—	1	2	9	8	8	1
		472	67	94	107	68	79	47	10
Deaths,	- - - -	272	93	60	11	10	38	33	27

The number of cases removed to hospital was 63, or 13·3 per cent. of the total. Hospital treatment was frequently objected to, especially in the case of children, and when given effect to was usually carried out at the request of the medical attendant, the influencing factor being either the severity of the attack or the inadequate facilities for treating, or even attempting to treat, the case at home.

No case occurred which could be attributed to infection from a previous case in the household.

### **Malaria.**

64 cases of malaria were notified during the year. There were no deaths.

The distribution of cases according to parish was as follows:—Avondale, 2; Blantyre, 8; Bothwell, 21; Cambuslang, 7; Cambusnethan, 5; Dalserf, 4; Dalziel, 1; Hamilton, 1; New Monkland, 5; Old Monkland, 7; Shotts, 3—Total, 64.

In every case the patient was a discharged soldier who had been infected abroad, and in 37 instances a definite locality of infection could be traced, as follows:—Salonica, 22; Mesopotamia, 5; Egypt, 5; India, 3; France, 1; Singapore, 1.

In the great majority of cases the patients were treated at home as insured persons by their own medical attendants, and the few who required hospital treatment had this provided by the Pensions Authorities. It was not found necessary to admit any case to a Middle Ward Institution.

### **Trench Fever.**

No case of trench fever was notified.

### **Dysentery.**

Four cases of dysentery were notified, the patient in each case being an ex-soldier infected abroad. No secondary cases occurred.

### Chickenpox.

381 cases; no deaths.

This disease was made compulsorily notifiable by an Order of the Scottish Board of Health on 1st October for a period of six months, and 381 cases were notified before the end of the year.

In one instance a case notified as chickenpox proved to be one of smallpox. This was in the case of an adult male aged 64 years, who was notified by his medical attendant on 6th October, 1920, as suffering from chickenpox. Immediately after the notification came in a telephone message was received from the medical attendant to the effect that he was of the opinion that the patient was suffering from typhus fever. The improbability of the case being one of chickenpox was suggested by the patient's age, and when the amended diagnosis was received it was immediately suspected that the case would prove to be one of hæmorrhagic smallpox. A visit was made at once by the Assistant Medical Officer, who found the case actually to be one of hæmorrhagic smallpox. Patient was at once removed to Dalsersf Hospital, where he died the next day.

### Diarrhœal Diseases.

Average annual number of deaths and death-rates per 1,000 of the population for six quinquennial periods (1891-1920), and for each of the years 1916-20 :—

	1891-95	1896-1900	1901-05	1906-10	1911-15	1916-20	1916	1917	1918	1919	1920
Deaths, -	151	226	250	212	173	111	129	86	118	95	128
Death-rate } per 1,000 }	0.990	1.33	1.34	1.07	0.83	0.52	0.61	0.40	0.55	0.44	0.59

### Measles.

The average annual number of deaths and death-rates per 1,000 of the population for six quinquennial periods (1891-1920), and for each of the years 1916-20, was :

	1891-95	1896-1900	1901-05	1906-10	1911-15	1916-20	1916	1917	1918	1919	1920
Deaths, -	140	111	78	114	112	94	126	106	124	40	73
Death-rate } per 1,000 }	.93	.65	.42	.57	.53	.44	.60	.50	.58	.18	.33

### Whooping-Cough.

The average annual number of deaths and death-rates per 1,000 of the population for six quinquennial periods (1891-1920), and for each of the years 1916-20, was :—

	1891-95	1896-1900	1901-05	1906-10	1911-15	1916-20	1916	1917	1918	1919	1920
Deaths, -	93	90	108	97	127	85	93	121	94	68	50
Death-rate } per 1,000 }	.62	.52	.57	.48	.61	.39	.44	.57	.43	.31	.23

### Ringworm.

147 cases of ringworm were brought under the notice of the Department, and 4 successfully treated with X-rays at the County Hospital, Motherwell.

### Scabies.

During the year 220 cases were reported. As it is often difficult to prevent the spread of this disease and to have treatment satisfactorily carried out at home, hospital treatment was offered where this was considered necessary.

### Venereal Diseases.

The County Scheme for the recognition and treatment of these diseases includes the Middle Ward District, and the work done under the scheme is given in the County Report, along with the number of cases dealt with from each area at the various treatment centres.

### School Closure.

SCHOOL CLOSURE. — Applications were made for certificates of closure to satisfy the requirements of Article 30 of the Scotch Education Code, as follows:—

School.	Parish.	Disease prevalent.
Overtown Public, - - -	Cambusnethan,	Measles.
Green's Public, - - -	New Monkland,	Whooping-Cough and Measles.
Riggend Public (Infant Dept.), -	Do.	Measles.
Meikle Drumgray R.C. (Infant Dept.), - - - -	Do.	do.

EXCLUSION OF SCHOLARS.—A special certificate giving the names of scholars excluded from school under the Public Health Act, is forwarded weekly to the Headmaster for the purposes of the Scotch Education Code, Article 19F.

### Anthrax.

Under the Diseases of Animals Act, 1894, 14 outbreaks of this disease, affecting 14 cattle, were reported by the Inspector under the Anthrax Order. The outbreaks were distributed as follows:—Avondale, 1; East Kilbride, 3; Glasford, 1; Bothwell, 1; Cambuslang, 3; Hamilton, 1; New Monkland, 2; Shotts, 2.



## MATERNITY AND CHILD WELFARE.

*Staffing Arrangements.*—A note regarding the staffing arrangements of the Medical Officers and Nurse Health Visitors will be found at the beginning of the portion of the Report dealing with the Midwives (Scotland) Act, 1915. In addition to the work carried out by the Nurse Health Visitors, assistance was also obtained throughout the year from seven District Nursing Associations—namely, those at Caldercruix, Glenboig, Motherwell, Quarter, Stonehouse, Strathaven, and Tollcross. In December an arrangement was also entered into with the Bothwell District Nursing Association for the District Nurse undertaking health visiting in Bothwellhaugh area. On an average, each Health Visitor, allowing for the work done by the District Nursing Associations, has about 400 births per annum in her district.

*Births Registered.*—The births registered numbered 7,562, which is equivalent to a birth-rate of 35 per 1,000 of the population. Reference to Table A, page 6, shows the births and birth-rates for each year since 1910, and the average rate for each decennial period since 1891. The average rates were:—1891-1900, 39·1; 1901-1910, 38·9; and 1911-1920, 32·5. The figure for the last-named period is low, this being due to the great decline in the annual number of births during the war years. During the five years prior to the war the average annual rate was 35 per 1,000, and in 1920 there was a recovery to 35.

*Births Notified.*—The total number of notifications received amounted to 7,718, of which 211 referred to stillborn children, leaving a total of 7,507 notifications of live births, or 99·2 per cent. of the total births registered. The following tabular statement shows the sources of notification:—

Doctors.	Midwives.	Handy- women.	Parents.	Institutions.	Health Visitors.	Total.
1920	4,467	114	916	174	127	7,718

Table M I shows the births registered, births notified, visits made by the Nurse Health Visitors, the attendant at confinement as ascertained at the first visit, deaths registered, and the infantile death-rate, the information being tabulated according to registration districts.

TABLE MI.

REGISTRATION DISTRICTS.	BIRTHS.		NUMBER OF VISITS.				ATTENDANT AT CONFINEMENT.			INFANT DEATHS.	
	Regis-tered.	Notified. Alive.	First.	Subsequent.		Total.	Doctor.	Mid-wife.	Handy woman.	Regis-tered.	Rate per 1,000 Births.
				Infants.	Mothers.						
Avondale, - - -	135	137	113	921	124	7	110	1	2	13	96·3
East Kilbride, - - -	110	98	85	279	36	18	80	2	3	10	90·9
Glasford, - - -	46	42	36	475	36	2	30	5	1	—	—
Stonehouse, - - -	114	121	132	267	28	16	65	63	4	12	105·2
<i>First Division,</i>	405	398	366	1,942	224	43	285	71	10	35	86·4
Blantyre, - - -	708	737	718	7,161	914	575	202	502	14	84	118·6
Bothwell, - - -	687	664	607	4,641	650	235	200	396	11	79	114·9
Bellshill, - - -	788	783	818	1,895	245	254	393	421	4	107	135·7
Holytown, - - -	721	692	631	3,112	382	183	329	284	18	61	84·6
Cambuslang, - - -	822	804	802	5,977	490	547	391	401	10	74	90·0
Cambusnethan, - - -	423	403	432	3,001	393	84	362	64	6	25	59·1
Calderhead, - - -	189	183	184	931	42	59	177	4	3	21	111·1
Dalserf, - - -	178	164	163	1,797	158	51	108	44	11	14	78·6
Larkhall, - - -	523	501	514	2,579	266	264	377	128	9	59	112·8
Dalziel, - - -	74	87	71	529	32	31	43	27	1	13	175·6
Hamilton, - - -	258	270	296	1,960	180	43	106	128	62	23	89·1
<i>Second Division,</i>	5,371	5,288	5,236	33,583	3,752	2,329	2,688	2,399	149	560	104·2
New Monkland, - - -	502	500	565	2,162	175	162	229	328	8	43	85·6
Old Monkland (East), - - -	91	100	83	439	65	17	31	47	5	12	131·8
Do. (Coatbridge), - - -	105	105	41	49	12	8	9	32	—	8	76·1
Do. (West), - - -	424	432	453	1,220	112	99	204	245	4	44	103·7
Shotts (East), - - -	172	191	207	317	46	67	181	25	1	17	98·8
Do. (Middle), - - -	97	97	74	307	31	20	69	2	3	7	72·1
Do. (Calderhead), - - -	207	207	234	748	60	139	230	4	7	18	86·9
Do. (West), - - -	145	148	152	662	46	56	128	17	—	17	117·2
Do. (North), - - -	43	41	25	147	13	6	7	18	—	2	46·5
<i>Third Division,</i>	1,786	1,821	1,834	6,051	560	574	1,088	718	28	168	94·0
<i>Total,</i>	7,562	7,507	7,436	41,576	4,536	2,946	4,061	3,188	187	763	100·9

It is believed that, though much benefit may be derived by mothers and children attending at Child Welfare Centres, institutions, &c., the principal results are obtained by adequate home visitation, and from the foregoing table it will be seen that 7,436 first visits were made by the Nurse Health Visitors, and that there were in all 56,494 visits. Those include 2,946 made for special reasons, viz. :—Ante-natal cases, 1,249; infant death inquiries, 754; opthalmia neonatorum, 693; whooping-cough, 71; puerperal fever, 59; measles, 18; pneumonia, 9; and adopted babies (first and revisits), 93. The number of revisits paid to individual cases varied considerably throughout the year, but in some instances as many as from 60 to 70 were made. Omitting the special visits detailed above, the others, made primarily in connection with births, numbered 53,548, which gives an average number of visits per case of 7·2. In 1919 the corresponding figure was 6·4.

Of the 7,436 births particulars of which were recorded, 4,061, or 54·6 per cent., were attended by medical practitioners; 3,188, or 42·9 per cent., by certified midwives; and only 187, or 2·5 per cent., by women not on the Midwives Roll. Reference to Table M I shows that the proportion of births attended by doctors and midwives respectively continues to vary very considerably in different districts.

*Infantile Mortality.*—Deaths of infants under one year numbered 763, giving an infantile mortality rate of 100·9 per 1,000 births, which is the lowest figure yet recorded.

Table A, page 6, shows the number of deaths and the death-rates for each year since 1910, together with the average rate for each decennial period since 1891. The average rates are as follows :—

1891-1900.	1901-1910.	1911-1920.
129·9	124·2	110·4

Table M II shows the deaths arranged according to certain group causes and age periods:—

TABLE MII.

CAUSE OF DEATH.	AGE PERIODS.									
	WEEKS.				Total.	MONTHS.				Total.
	- 1	1-2	2-3	3-4		1-3	3-6	6-9	9-12	- 12
1. Prematurity, - -	95	13	3	9	120	8	1	—	—	129
Congenital Malformation, - -	10	7	4	4	25	10	2	2	—	39
Atelectasis, - -	10	1	2	2	15	—	1	—	—	16
Injury at Birth, -	4	—	—	—	4	—	—	—	—	4
2. Atrophy, Debility, and Marasmus, -	55	8	14	6	83	27	16	2	1	129
3. Diarrhœa, - -	1	—	5	4	10	21	29	26	22	108
Other Digestive Diseases, - -	—	—	—	—	—	4	2	1	—	7
4. Pneumonia, - -	—	2	2	3	7	20	29	19	18	93
Bronchitis, - -	—	2	2	1	5	14	17	12	9	57
Other Respiratory Diseases, - -	—	1	—	1	2	—	1	2	—	5
5. Tuberculosis, -	—	—	—	—	—	—	2	1	—	3
Pulmonary, - -	—	—	—	—	—	—	2	1	—	3
Meningeal, - -	—	1	—	—	1	2	6	8	1	18
Abdominal, - -	—	—	—	—	—	—	1	1	3	5
Others, - -	—	—	—	—	—	—	3	—	—	3
6. Convulsions, - -	5	4	4	—	13	2	5	2	3	25
Meningitis, - -	—	—	1	—	1	3	4	6	4	18
Other Nervous Diseases, - -	—	—	—	—	—	1	—	1	—	2
7. Measles, - -	—	—	—	—	—	1	1	8	14	24
Whooping-cough, -	—	—	—	—	—	7	4	4	10	25
Diphtheria, - -	—	—	—	—	—	—	—	1	1	2
Scarlet Fever, -	—	—	—	—	—	—	—	—	1	1
8. Syphilis, - -	2	—	—	—	2	—	—	—	—	2
9. Violence, - -	1	—	—	—	1	1	—	—	1	3
10. All other causes, -	3	2	2	2	9	11	11	6	8	45
	186	41	39	32	298	132	135	102	96	763

317, or 41·5 per cent., of the deaths were due to developmental causes, which are given in the first two groups of the foregoing table. 247 of these deaths occurred during the first four weeks of life, and 45 between the first and third month of life. Of the



acquired diseases, the largest number of deaths—viz., 108—were due to diarrhœa. The average number of deaths for the last five years from diarrhœa was 85. Pneumonia and bronchitis also contributed considerably towards the death-rate, there being 93 and 57 deaths respectively from those two causes.

*Ophthalmia Neonatorum.*—Cases, 89; rate per 1,000 births, 11·77. During the year 89 cases of ophthalmia neonatorum were reported; 59 cases were notified by medical practitioners and 18 by midwives, while 12 were discovered by the Nurse Health Visitors. In these latter cases the persons in attendance at the confinements were—doctors, 5; and midwives, 7.

In 28 cases a medical practitioner was present at the confinement; that is, the disease developed in connection with 0·69 per cent. of all the confinements conducted by doctors; a midwife was present at the birth in 44 cases, which is 1·38 per cent. of the total midwives' confinements; while in 17 cases a handywoman was present, this being 9·09 per cent. of the total confinements attended by this class of midwife.

In every case where there was the slightest discharge a swab was taken by the Nurse Health Visitor for bacteriological examination, and in 14 cases this revealed the presence of gonococci. 7 of those positive results were in the cases of children who were discovered by the Nurse Health Visitor to be suffering from an inflammatory eye condition, which had not been notified, although a doctor in 4 cases and a midwife in 3 cases was in attendance. In 30 instances the bacteriological report showed the presence in the discharge of many pus cells, without organisms to account for their presence, and such swabs were regarded as positive. In the remaining specimens taken, which numbered 65, the eye condition was found to be due to infection with some organism other than the gonococcus.

In 84 cases, 6 of which were reported to be of severe type, treatment was carried out in the patients' own homes, while in 5 instances the infants were removed to hospital for treatment. The hospital cases were all of a serious nature, and in 2 cases there was loss of vision of both eyes; in a third case there was loss of vision of one eye, while in a fourth the sight of one eye was slightly impaired. The cases treated at home by the nursing staff all made a good recovery, and there was no ultimate impairment of sight.

It may be said, in connection with treatment, that the nurses are instructed to regard each case as of equal clinical importance, irrespective of bacteriological findings.

3 of the infants notified as suffering from ophthalmia neonatorum died from malnutrition, including one of the cases where there was total loss of vision. The other child which is totally blind resides with its parents in Blantyre Parish and is in good general health.

*Puerperal Septicæmia*.—Cases, 60; deaths, 25; fatality, 43·4 per cent.; deaths per 1,000 births, 3·3.

The number of cases of puerperal septicæmia reported during the year was 60, representing 7·9 per 1,000 births, which is a very considerable increase compared with previous years; the average for the previous decennial period being 3·6.

42, or 70·4 per cent. of the cases were removed for hospital treatment, 37 being admitted to the County Hospital, Motherwell, and 2 to Lightburn Joint Hospital, while 3 were treated in other institutions. 18 cases were treated at home.

In 32, or 53·3 per cent. of the cases, medical practitioners were in attendance at confinement, while 25, or 41·6 per cent. of the cases, occurred in the practice of certified midwives. 1 case was attended by a handywoman, and 2 cases were reported from institutions.

The nature of the confinement was reported to be normal in 45 cases while 15 were abnormal, instrumental interference being necessary.

The following tabular statement shows the age distribution of the cases and deaths:—

Years.		Under 20	20-25	25-30	30-35	35-40	Over 40	Total.
Cases,	-	4	18	11	10	10	7	60
Deaths,	-	1	6	3	6	6	3	25

In all cases where a midwife or a handywoman was in attendance, precautions necessary to prevent the spread of infection were carried out under the supervision of the Nurse Health Visitors, and in no instance could the occurrence of the disease be associated with infection from a previous case.

*Stillbirths*.—The stillbirths notified during the year numbered 211, and investigations were made into 189. It was found that in 120 cases the birth occurred after the full duration of pregnancy, 22 took place at the eighth month, 42 at the seventh month, and 5 before the seventh month. The attendant at birth in 137 cases was a

medical practitioner, a midwife being in attendance in 48 cases, and a handywoman in 4. In 110 instances the confinement was normal, while 79 were abnormal, 54 requiring instrumental interference. 46 of the bodies were macerated. The health of the mother was described as being satisfactory throughout pregnancy in 110 cases, while 79 suffered from general ill-health.

The pregnancy at which the stillbirth occurred is shown as follows :—

#### PREGNANCY.

1st.	2nd.	3rd.	4th.	5th.	6th.	7th.	8th.	9th.	10th.	11th & over .
41	14	15	18	19	11	7	19	13	10	22

In 154 of the confinements no previous stillbirth had occurred. Of the remaining 35, previous stillbirths had taken place as follows :—

One in 15 cases.	Six in 3 cases.
Two in 6 „	Seven in 1 „
Three in 4 „	Eight in 1 „
Four in 3 „	Nine in 1 „
Five in 1 „	

With reference to the ages of the mothers giving birth to stillborn children, it may be said that 14 were under 20 years, 33 between 20-25 years; 28 between 25-30 years; 35 between 30-35 years; 53 between 35-40 years; while 26 were over 40 years.

Only in a few instances were the mothers engaged in occupations other than household duties, as follows :—Domestic service, 2; pithead worker, 1; cement worker, 1; brickworker, 1; jellyworker, 1; and machinist, 1.

Although special enquiry respecting the cause of stillbirth was made in 189 cases, it was only possible to obtain information bearing on this point in 90 instances, where the following causes were noted as being probably responsible :—(a) *Affecting the Mother*—Difficult labour, 15; contracted pelvis, 9; placenta prævia, 5; prolapsed uterus, 4; nephritis and eclampsia, 6; ante-partum hæmorrhage, 3; indefinite, viz., accident, shock, fright, over exertion, 25. (b) *Affecting the Child*—Abnormal presentation, 9; injury at birth, 4; congenital malformation, 4; cord round neck, 3; prematurity, 3.

*Ante-Natal Cases.*—The total number of visits paid during the year to expectant mothers was 1,249. Wherever possible ante-natal cases were urged to avail themselves of the facilities offered for

consultation with the medical officers at the Child Welfare Centres, and they were kept under observation by the Nurse Health Visitors until confinement had taken place. In a number of instances where the home conditions were unsatisfactory, or where the mother's health was unfavourable or complications present, admission to Bellshill Hospital was arranged for when the time of confinement approached.

*Child Welfare Centres.*—As mentioned in the 1914-19 Summary Report, eight Child Welfare Centres have been established, viz., at Baillieston, Bellshill, Blantyre, Cambuslang, Larkhall, Newmains, Shotts, and Uddingston, and in June arrangements were completed with the Burgh of Airdrie for mothers and children from surrounding County areas attending the Burgh Centre, which is held once a week in the Sir John Wilson Town Hall.

In connection with each Centre a voluntary committee has been formed by ladies residing locally, interested in Child Welfare work. The help of these committees in promoting the work of the Centres is much appreciated, and with their assistance it has been possible to establish thrift and sewing clubs. Lectures and demonstrations in cookery, and the cutting and fitting-out of garments, &c., have also been a special feature of the committees' activities.

Each Centre meets one afternoon per week, and the following tabular statement gives a record of the attendances, consultations, lectures, and demonstrations:—

CHILD WELFARE CENTRES.	FIRST ATTENDANCES.			TOTAL ATTENDANCES.			CONSULTATIONS.			Lectures.	Demonstrations.
	Mothers.	Children.	Infants.	Mothers.	Children.	Infants.	Mothers.	Children.	Infants.		
Baillieston,	180	54	129	1,988	708	1,344	55	113	240	6	33
Bellshill, -	250	79	251	6,263	2,817	4,579	221	127	365	10	35
Blantyre, -	323	106	261	5,168	2,114	4,460	427	234	473	13	32
Cambuslang,	399	103	294	4,517	1,851	3,615	214	309	428	10	32
Larkhall, -	310	65	234	2,713	1,273	2,355	173	149	328	6	18
Newmains,	213	56	184	2,720	704	947	59	110	185	14	28
Shotts, -	262	64	221	2,701	772	1,178	84	98	268	14	30
Uddingston,	87	43	129	2,885	1,271	2,019	112	69	155	8	37
	2,024	570	1,703	28,955	11,510	20,497	1,345	1,209	2,442	81	245



*Necessitous Cases.*—Assistance, consisting in most instances of a supply of food and milk, was provided by the Local Authority for mothers and children living under necessitous circumstances. During the year the cases of this description numbered 956, and the amount expended on food and milk totalled £860. In each instance the family circumstances were carefully considered by the Assistant Medical Officer, in consultation with the local Nurse Health Visitor, assistance being given or withheld according to the merits of the particular family dealt with.

*Institutions.*—An account of the work carried on at the County Maternity Hospital, Bellshill, and the County Convalescent Home, Calderbank House, will be found in the section of the report dealing with institutions.

### **Institutions.**

During the year the institutional accommodation was very fully taxed, no fewer than 1,781 cases of infectious disease being admitted to the County Hospital, near Motherwell, from the Middle Ward District, as well as 136 from outside areas, as shown in Tables F (a) and F (b). Advantage was also taken of the accommodation at Lightburn Joint Hospital for the treatment of acute infectious diseases.

Hairmyres Farm Colony and the institutions at Shotts, Stonehouse, and Uppertown continued to be utilised for the treatment of tuberculosis, although it was found necessary during the latter part of the year to utilise the accommodation at Uppertown for the treatment of cases of smallpox.

For some time it has been recognised that the treatment necessary for certain forms of surgical tuberculosis, especially those forms affecting the spine, bones, joints, &c., ought to be carried out in a specially equipped institution and by a specially qualified staff. For some years the majority of such cases have been treated in the County Sanatorium, Stonehouse, where Dr. Sutherland and the staff have familiarised themselves with the methods of treatment required, and it was accordingly determined to allocate the accommodation at this institution entirely for the treatment of tuberculosis of those types, and since early in the year pulmonary cases have been excluded, and only surgical cases dealt with. The work done in connection with the treatment of those latter cases at Stonehouse is fully described in the portion of the report dealing with that institution.

The outbreak of smallpox in the spring necessitated the utilisation of the small isolation hospital at Dalserf for the reception and treat-

ment of patients suffering from that disease. The last case of smallpox was discharged on 19th November, and during the remainder of the year a few cases of verminous conditions were dealt with. Certain alterations and improvements were carried out at Dalserf Hospital, including the extension of the nurses' accommodation, the erection of an entrance porch, the construction and fitting up of a bathroom, and the installation of a new hot-water supply system. The County Hospital at High Blantyre is still used as a Nurses' Home.

The hospital at Bellshill is now devoted solely to the treatment of mothers and children under the Maternity and Child Welfare Scheme, and as such is specially reported on in another portion of this Report. The need for a convalescent home for mothers and children whose health was unsatisfactory became clamant, and early in the year the District Committee succeeded in completing arrangements for the purchase of Calderbank House—a mansion-house situated near Baillieston. Certain structural alterations and improvements—including the provision of a central heating system—were necessary to adapt this house to the purposes of a convalescent home, but by the month of August arrangements were so far advanced as to allow of patients being admitted.

TABLE F.—HOSPITALS AND SANATORIA. (a) PATIENTS ADMITTED FROM MIDDLE WARD DISTRICT.

HOSPITALS AND SANATORIA.	Cases in Hospital at the beginning of year.	Admitted during year from the Middle Ward.	Dis- charged.	Died.	Cases remaining in Hospital at the close of year.	NATURE OF CASES ADMITTED DURING YEAR.													Children.	Total.
						Smallpox.	Diphtheria.	Scarlet Fever.	Typhoid Fever.	Cerebro-Spinal Fever.	Puerperal Fever.	Erysipelas.	Pneumonia.	Influenza.	Pulmonary Tuberculosis.	Tuberculosis, All other forms.	Veneral Diseases.	Other Diseases.		
Motherwell,	- 174	1,781	1,613	98	244	—	302	1,110	50	19	36	28	58	4	1	94	41	*38	—	1,781
Lightburn,	- 40	189	202	8	19	—	57	102	8	2	2	1	5	—	3	7	1	1	—	189
Shotts,	- 42	108	93	21	36	—	—	—	—	—	—	—	—	—	92	16	—	—	—	108
Stonehouse,	- 50	90	83	7	50	—	—	—	—	—	—	—	—	—	12	78	—	—	—	90
Longriggend,	- 17	115	95	6	31	2	—	—	—	—	—	—	—	—	86	27	—	—	—	115
Hairmyres,	- 41	162	139	—	64	—	—	—	—	—	—	—	—	—	109	53	—	—	—	162
Dalserf,	- —	38	34	4	—	21	—	—	—	—	—	—	—	—	—	—	—	17	—	35
Bellshill,	- 46	433	412	34	33	—	—	—	—	—	—	—	—	—	—	—	—	—	186	433
Calderbank House,	—	76	56	—	20	—	—	—	—	—	—	—	—	—	—	—	—	—	28	76
TOTALS,	410	3,589	2,724	178	497	23	359	1,212	58	21	38	29	63	4	303	275	42	53	214	2,989

\* Includes 8 Measles; 10 Encephalitis Letiargica; and 2 Whooping-Cough.

+ Includes 1 Measles; 10 Smallpox contacts; and 3 Verminous Children.

TABLE F.—HOSPITALS AND SANATORIA. (b) PATIENTS ADMITTED FROM AREAS OUTWITH THE MIDDLE WARD DISTRICT.

AUTHORITY.	COUNTY HOSPITAL, MOTHERWELL.							COUNTY SANATORIUM.							BELLSHILL HOSPITAL.	CALDERBANK HOUSE.				
	Diphtheria.	Scarlet Fever.	Enteric Fever.	Cerebro-Spinal Fever.	Puerperal Fever.	Erysipelas.	Pneumonia.	Tuberculosis. All forms.	Veneral Diseases.	Other Diseases.	DALSBERG HOSPITAL. Smallpox.	Shotts.	Stonehouse.	Uppertown.			Hairmyres.	Mothers.	Children.	Mothers.
Upper Ward,	-	1	8	-	-	1	-	4	3	3	-	1	3	3	+5	5	9	10	-	3
Lower Ward,	-	-	-	-	1	-	-	3	1	1	1	3	3	3	+5	6	2	3	2	-
Airdrie,	-	-	-	-	-	-	-	-	5	-	-	4	-	-	+7	9	-	-	-	-
Biggar,	-	1	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-
Coatbridge,	-	-	-	-	-	-	-	-	12	-	8	-	-	-	-	-	-	-	-	-
Hamilton,	-	3	1	5	2	3	1	2	20	2	4	1	2	3	3	5	-	2	-	-
Lanark,	-	1	1	-	-	1	-	3	3	-	-	-	1	-	-	1	2	-	-	-
Motherwell,	-	-	-	-	-	-	-	2	26	-	-	-	-	-	-	1	-	-	-	-
Rutherglen,	-	-	-	-	-	-	-	1	2	-	-	4	1	-	14	15	-	-	-	-
Wishaw,	-	2	-	-	-	-	1	1	11	-	-	2	-	1	1	5	-	-	-	-
Ayr,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4	-	-	-	-
Berwick,	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	1	-	-	-	-
Clackmannan,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-
Dumbartonshire,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-
Dumfries,	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	2	-	-	-	-
Fifehire,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4	-	-	-	-
Forfarshire,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5	-	-	-	-
Glasgow,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	12	-	-	-	-
Inverness,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-
Kirkcudbrightshire,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-
Midlothian,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-
Orkney,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-
Renfrewshire,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4	-	-	-	-
Roxburgh,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4	-	-	-	-
Selkirkshire,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-
Stirlingshire,	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-
Wolverhampton,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	1	-	-	-	-
Totals,	-	7	11	6	4	3	5	3	85	*6	14	15	9	33	96	12	17	2	3	3

† Includes 4 cases of Smallpox.

\* 1 case of Skin Disease; 2 cases of Encephalitis; 1 case of Measles;  
1 case of Anthrax; and 1 case of Trachoma.



### County Sanatorium, Shotts.

*Physician Superintendent*, JAMES JOHNSTONE, M.B., Ch.B., D.P.H.

*Visiting Physician*, - JOHN M'MILLAN, M.B., Ch.B.

*Matron*, - - - Miss KEIR.

**BUILDINGS.**—There is no alteration in the accommodation for patients. In January a dispensary was opened for the outdoor treatment of Venereal Diseases.

**STAFF.**—The medical staff is non-resident. The indoor staff consists of a matron, a ward sister, 7 nurses, and 9 maids. The outdoor staff consists of 2 gardener-attendants and a fireman.

**PATIENTS TREATED.**—There were in residence at the beginning of the year 37 patients, and during the year 123 were admitted, making the total number under treatment 160. The patients discharged during the year numbered 126, and 92 of these were cases of pulmonary tuberculosis. Of the remaining 34 cases, 5 were patients in whom the diagnosis of tuberculosis was not confirmed, while 29 were cases suffering from non-pulmonary forms of the disease, and are referred to separately in the text. In discussing the clinical data the 5 non-tuberculous cases are excluded.

*Place of Residence.*—Of the total number of cases discharged, 106 resided in the Middle Ward District, 5 in the Lower Ward, 1 in the Upper Ward, and 14 in Burghs within the County. The residences—in the Middle Ward—according to parish were as follows:—

Bothwell, - - -	43	Dalserf, - - -	6	
Cambuslang, - -	15	New Monkland, -	5	
Blantyre, - - -	13	Old Monkland, -	4	
Cambusnethan, -	11	Hamilton, - - -	1	
Shotts, - - -	7	Avondale, - - -	1	
				106
Lower Ward, -	5	Upper Ward, -	1	
				6
Burghs:—Hamilton, 5; Wishaw, 3; Rutherglen, 3;				
Airdrie, 2; Motherwell, 1, - - -				14
Total, - - -				126

*Age and Sex.*—In the following table the cases are divided according to age and sex, and in the fifth column are given age groups for both sexes :—

Quinquen. periods.	Males.	Females.	Both Sexes.	Age Groups.	
- 5	7	3	10	Pre-School age, -	10
- 10	5	6	11	} School age, -	18
- 15	4	3	7		
- 20	12	4	16	} Adolescence, -	33
- 25	12	5	17		
- 30	8	6	14	} Early maturity, -	53
- 35	7	5	12		
- 40	12	5	17		
- 45	8	2	10	} Late maturity, -	12
- 50	8	1	9		
- 55	1	—	1		
- 60	1	—	1		
- 65	1	—	1		
	86	40	126		

#### PULMONARY TUBERCULOSIS.

92 cases were of the pulmonary type.

*Duration of Illness.*—Patients classified according to duration of illness stated in monthly periods :—

Months,	1-3	3-6	6-12	12-18	18-24	Over 24	Indefinite.	Total.
Patients, -	7	4	7	8	8	55	3	92

*Earliest Manifestations Recognised.*—The cases are classified according to the nature of the earliest recognised manifestation of illness :—Cough and spit, 53; pleurisy, 12; pneumonia, 7; hæmoptysis, 6; influenza, 4; adenitis, 3; debility, 2; asthma, 1; hoarseness, 1; indefinite, 3—total, 92.

*General Results and Duration of Residence.*—In the following table the cases are divided into 3 groups (Turban Gerhardt classification), and in each group are classified according to their general condition on discharge, while below is given the duration of residence for each class stated in days :—

Stage of Disease.	No. of Patients.	Disease Arrested.	Improved.	Stationary.	Worse.	Died.
Group I, -	15	4	11	—	—	—
Group II, -	18	—	17	1	—	—
Group III, -	59	—	17	11	10	21
Total, -	92	4	45	12	10	21

*Duration of Residence in Days.—*

Average, - - -	102	135	123	67	104
Maximum, - - -	190	729	550	211	450
Minimum, - - -	37	13	3	15	3

*Complications.*—In 26 cases—3 in Group II and 23 in Group III—one or more complications were present, as follows:—Tub. peritonitis, 5; tub. laryngitis, 5; tub. enteritis, 2; tub. adenitis, 1; ischio-rectal abscess, 2; dyspepsia, 3; otorrhœa, 2; epilepsy, 1; neuritis, 1; pharyngeal ulcers, 1; spinal caries, 1; empyema, 1; albuminuria, 1.

*Sputum Examination.*—The following shows the results of sputum examination:—

	T.B. +	T.B. -	No spit.	Not examined.
Group I, - - -	2	10	2	1
Group II, - - -	6	9	3	—
Group III, - - -	43	15	—	1
	<hr/> 51	<hr/> 34	<hr/> 5	<hr/> 2

In the 51 cases where the sputum proved positive, tubercle bacilli were detected by the ordinary smear method of examination, and in no case found negative by this method were tubercle bacilli subsequently discovered by guinea-pig inoculation.

## NON-PULMONARY TUBERCULOSIS.

The cases of non-pulmonary tuberculosis numbered 29, and may be grouped as follows:—Bones and joints, 11; abdominal, 9; cervical adenitis, 8; lupus, 1.

*Bones and Joints.*—11 cases, viz., hip-joint disease, 3; spinal caries, 2; tibia, 2; sacro-iliac joint, 1; elbow joint, 1; foot, 1; sternum, 1.

The 3 cases of hip-joint disease were aged 19, 8, and 6 years; 2 of the cases had mixed infection, with discharging sinuses, and 1 case had also tuberculous disease of the ankle. 2 of the cases were discharged with the disease arrested, and the other was improved.

The 2 cases of spinal caries were aged 32 and 5 years. The adult was transferred to Stonehouse Sanatorium for further treatment, and the other was discharged in a plaster jacket, with the disease quiescent.

The 2 cases of disease of the tibia were aged 18 and 12 years, and both showed evidence of mixed infection; one case was discharged with the disease arrested, and the other was greatly improved.

The case of disease of the sacro-iliac joint, aged 19 years, had also an ischio-rectal abscess. He was admitted, after operation, from the County Hospital, Motherwell, and was discharged with the disease still active after being in residence 478 days.

The case of disease of the elbow joint, aged 3 years, was admitted from the County Hospital, Motherwell, after having been operated on there.

The case of disease of the foot, aged 21, was a discharged soldier, whose foot had been amputated in Stobhill Hospital. He was provided with an artificial foot, and discharged with the disease arrested after a residence of 83 days.

The case of disease of the sternum was admitted, after operation, from the County Hospital, Motherwell. There had been evidence of mixed infection, but he was discharged with the disease arrested after a residence of 56 days.

*Abdominal Tuberculosis.*—9 cases. 3 of the patients were adults, and 6 children, all under 4 years of age. The average duration of residence was 106 days, maximum 190, and the minimum 16.

All the children progressed favourably, and were discharged with the disease arrested. One of the adult cases died, one was transferred for operation after 16 days' residence, and the other discharged improved.

*Cervical Adenitis.*—8 cases—1 adult and 7 children. The adult case had also disease of the sacrum, and 1 of the children had lupus. 2 of the cases had mixed infection. The adult was transferred to Stonehouse for further treatment, and 4 of the children were discharged with the disease arrested. The average duration of residence was 149 days.

*Lupus.*—1 case, a girl aged 8 years, admitted from the County Hospital, Motherwell, was treated with tuberculin. After a residence of 517 days her condition showed no improvement, and she was sent back to Motherwell for further operative treatment.

### County Sanatorium, Stonehouse.

*Resident Physician-Superintendent*, - J. R. SUTHERLAND, M.B., Ch.B., D.P.H.  
*Visiting Physician*, - - - - - A. H. M'LEAN, M.B., C.M.  
*Matron*, - - - - - Miss THOMSON.

There were in residence at the beginning of the year 54 patients, and during the year 92 patients were admitted and 93 dismissed, leaving under treatment at the end of the year a balance of 53. Of the 93 patients discharged 25 were admitted for treatment of pulmonary and the remainder for non-pulmonary tuberculosis. The districts from which they came are noted below :—

#### *Middle Ward—*

Avondale, - -	2	Dalserf, - -	13	
East Kilbride, -	1	Hamilton, - -	6	
Blantyre, - -	6	New Monkland, -	2	
Bothwell, - -	22	Old Monkland, -	3	
Cambuslang, - -	15	Shotts, - -	11	
Cambusnethan, -	5			86

#### *Other Districts and Burghs in the County—*

Upper Ward, - -	4	Lower Ward, -	1	
				5

#### *Burghs—*

Coatbridge, - -	1	Motherwell, - -	1	
				2
				93

**PULMONARY TUBERCULOSIS.**—Three of the 25 patients admitted under the diagnosis of pulmonary tuberculosis were found not to be suffering from that disease, 1 having lobar pneumonia and 2 chronic bronchitis. These were adult males. Actually affected with pulmonary tuberculosis were 14 males and 8 females, whose ages ranged from 14 to 54 years. Graded in the usual way, 15 of them were of adolescent age, 5 of early mature age, and 2 of late mature age. The disease was advanced in the majority of the patients, 15 of whom, classified by the Turban-Gerhardt scale, belonged to the third, 6 to the second, and 1 to the first stage of illness. Tubercle bacilli were discovered in the spit of 6 patients in the third stage of illness, and in that of 2 in the second stage. The average duration of treatment was 131 days, improvement resulted in 12 cases, but treatment failed to amend the condition of the rest, of whom 2 showed no appreciable change, 4 deteriorated in health, and 4 died in sanatorium.



NON-PULMONARY TUBERCULOSIS.—Among the 68 patients admitted to be treated for non-pulmonary tuberculosis were 8 not so affected, but suffering severally from one of the following diseases:—Intra-pelvic sarcoma, rheumatoid arthritis, pleural empyema, infantile paralysis, acute osteo-myelitis, traumatic arthritis, adolescent scoliosis, and myositis of the lumbar muscles.

SEX AND AGE DISTRIBUTION.—The patients bearing definite non-pulmonary tuberculous lesions were equally divided between the two sexes, and showed great similarity in age distribution.

Quinquen. Period.	Males.	Females.	Both Sexes.	Age Group.	
- 5	4	2	6	Pre School age,	- 6
- 10	11	15	26	School age,	- 42
- 15	8	8	16		
- 20	4	4	8	Adolescence,	- 9
- 25	1	—	1		
- 30	2	1	3	Early maturity,	- 3
	30	30	60		

The site of the lesions and average duration of residence and results of treatment are given in the following table:—

	Average duration in Days.	Well.	Im- proved.	No Change.	Worse.	Died.	Total.
Spine—							
Cervico-dorsal region,	343	2	—	—	—	1	3
Dorsal region, -		5	—	—	—	1	6
Dorso-lumbar region,		1	—	—	—	—	1
Joint—							
Hip-joint, -	299	4	—	1	—	2	7
Ankle-joint, -	160	1	—	1	—	—	2
Bone, - - -	100	2	1	—	—	—	3
Gland—							
Cervical region, -	132	15	6	—	—	—	21
Abdomen, - -	170	8	4	1	—	—	13
Lupus (facial), -	165	1	—	—	—	—	1
Multiple Open Lesions,	429	—	1	1	—	1	3
		39	12	4	—	5	60

REMARKS.—A noteworthy feature of the cases of non-pulmonary tuberculosis dismissed during the year was the long-standing nature of the disease before treatment was sought from the Public Health Authority. Whatever the causes of this delay were, its results were deplorable, always leading to great prolongation of illness, often to

irreparable deformity, and occasionally to death. More than in any other form of the disease was treatment deferred in spinal tuberculosis, in which the average duration of illness was  $4\frac{1}{2}$  years; but in disease of the hip-joint it was little less, being shorter by only half a year. A contrast was observed in abdominal tuberculosis, the more rapid course of which compelled patients to apply comparatively early for treatment—on an average, in 11 months from its onset. In tuberculous osteitis the time was even shorter, doubtlessly due to the early rupture of cold abscesses and the need for frequent dressing of the sinuses resulting. As examples of the effect of delay in getting treatment may be mentioned two cases of spinal tuberculosis, one of which had been ill 13 and the other  $4\frac{1}{2}$  years before being treated. Both of these were then markedly deformed hunchbacks, who died from septic poisoning, caused by infection of sinuses by pyogenic germs long before the persons reached sanatorium. To these might be added the case of a girl, aged 10, affected with hip-joint disease for 8 years, by which time such destruction had occurred in the joint that the leg was 3 inches shorter than its neighbour. Three years later she was dismissed well, but crippled.

Another striking feature was the large number of patients operated on prior to admission, with none too happy results. Among others these included a girl admitted with amyloid disease, a sequel to excision of the hip-joint and secondary infection of the sinuses so produced; also a boy with septicæmia following the opening of a large crural abscess communicating with the hip-joint, which had thereby become contaminated with pyogenic germs. Both of these patients ultimately died in sanatorium, not from tuberculous disease, but from the complications stated. As regards tuberculous glands of the neck, only 5 out of 21 cases were admitted with the affected glands unopened. 10 of the remainder had received operative treatment, and, with one exception, had discharging sores. Several of them had been repeatedly operated on, the history generally being that an enlarged gland had been excised and the patient shortly thereafter dismissed from hospital, whereupon another gland had enlarged, which in turn was removed, and so on. In consequence a relatively large number of patients was left with unsightly scars and sinuses of the neck.

It has been amply proved, and is now almost everywhere recognised, that non-pulmonary tuberculosis is not a local but a general infection of the body with the tubercle bacillus. By the time a patient presents himself with what appears to be a circumscribed lesion of bone, joint, or gland, numerous other tuberculous deposits are inevitably present, although perhaps not detectable by ordinary methods of examination. The operative removal of one focus of the disease,

however obvious it may be, is of little avail when there are left other hidden ones to take its place. The period of treatment is not shortened by such a procedure, for the widespread dissemination of the disease in the body demands in itself prolonged residence under sanatorium or equally good conditions, during which its various foci are all susceptible of improvement. Indeed the disease, if not advanced and associated with septic infection, is noted for its tendency to spontaneous healing. In the absence of these complications it is often only necessary to place the patient in healthy surroundings to effect a cure. For these reasons—the disseminated character of the disease and its inclination to spontaneous cure—its treatment, it would appear, may with few exceptions be best carried out by conservative methods. Operative treatment, as well as touching only a part of the disease, is always mutilative, and, moreover, often affords access to the body of organisms of a more injurious nature than the tubercle bacillus itself. Viewed even from the financial standpoint their entry is of considerable importance, for, by retarding the patient's recovery and frequently producing interminable suppuration, it adds greatly to the cost of treatment.

The patients dealt with in this report were accordingly treated on conservative lines, which consisted in exposing all to the open air and sunshine in a regulated fashion. Additionally, in spinal and osteo-articular tuberculosis, patients were placed in good orthopædic positions, and so retained by extension, by splints of celluloid or plaster-of-Paris, or by suitable cushions, and care was taken to avert septic infection of abscess cavities by regularly aspirating their contents under aseptic precautions. During the season when sun treatment was practicable all forms of splints rendering insolation difficult were dispensed with as far as possible as means of immobilising diseased parts; but in a few cases their use had to be continued, as they proved the only means of relieving pain. As all the pavilions are not yet provided with verandahs, the Berck bed was found to be most convenient for many patients, owing to the ease with which it can be carried from the ward into the open. With regard to tuberculous disease of the glands of the neck every endeavour was made first to remedy any abnormal state of the nose, throat, or teeth likely to act as a source of tuberculous or other infection. Apart from these measures reliance was mainly placed on exposing the patients and their lesions to the open air and sunshine, and in aspirating those glands which liquefied. The freedom from smoke and other impurities of the atmosphere at the sanatorium greatly facilitated the use of these methods, to which are largely due the satisfactory results obtained.

### County Sanatorium, Uppertown, Longriggend.

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*Physician Superintendent*, J. THOMSON DICK, M.B., Ch.B., D.P.H.

*Visiting Physician*, - JAMES KIRKLAND, L.R.C.P., L.F.P.S.

*Matron*, - - - Miss MILLER.

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**BUILDINGS.**—There are two ward pavilions, one having accommodation for 20 patients and the other for 14. There are also two open pavilions, each of which accommodates 6 beds, the total bed accommodation being thus 46.

**STAFF.**—The medical staff is non-resident. In December Dr. Kirkland, who had acted as visiting physician for a number of years, died, and during the current year his partner, Mr. Richard Rae, M.B., Ch.B., D.P.H., was appointed.

The resident staff consists of a matron, a ward sister, 7 nurses, 8 maids, and 2 gardener-attendants. The matron, Miss Miller, was appointed in August in place of Mrs. Ballantyne, who had resigned.

**PATIENTS TREATED.**—There were in residence at the beginning of the year 27 patients, and during the year 139 were admitted, making the total number under treatment 166. 130 were discharged, leaving 36 still in residence at the end of the year. The number under treatment is not quite comparable with the number in previous years, as the institution was closed for the treatment of tuberculosis from 10th September to 27th October, during which time the accommodation was utilised for the treatment of smallpox. The period available for the treatment of tuberculosis was thus reduced by about 7 weeks.

On the opening of the sanatorium for smallpox patients the more severe cases of tuberculosis were transferred to other Middle Ward institutions, while the others were sent home. The latter were kept under observation, and the great majority were either taken back into Uppertown on its being reopened, or were admitted in the meantime elsewhere. With the exception of the maids, all of whom left, the ordinary sanatorium staff did duty while the smallpox cases—2 from the Middle Ward, 3 from the Lower Ward, and 4 from the Burgh of Airdrie—were in residence.

The 130 discharged cases are divided into four groups according to their clinical condition, and in such of the tabular statements as



deal with clinical data those in Group IV, 10 in number, are not included, in that the cases relegated to this group were not found to be suffering from tuberculosis; 28 cases of non-pulmonary tuberculosis are also excluded, and are dealt with separately.

*Place of Residence.*—Of the total number of cases discharged, 102 resided in the Middle Ward District, 5 in the Lower Ward, 20 in Burghs within the County, and 3 in places outwith the County. The residences in the Middle Ward were, according to Parish, as follows :—

Bothwell, - - -	26	Cambusnethan, -	5	
Old Monkland, - -	24	Shotts, - - -	4	
Cambuslang, - - -	17	New Monkland, -	2	
Blantyre, - - -	14	Stonehouse, - -	2	
Dalserf, - - -	7	Hamilton, - - -	1	
				102
Lower Ward, 5. Burghs—Airdrie, 3; Hamilton, 3;				
Rutherglen, 14; outwith the County, 3, - - -				28
Total, - - -				130

*Age and Sex.*—In the following table the cases are divided according to age and sex, and in the fifth column are given age groups for both sexes :—

Quinquen. periods.	Males.	Females.	Both Sexes.	Age groups.	
- 5	5	6	11	Pre-School age, -	11
- 10	8	6	14	} School age, -	23
- 15	5	4	9		
- 20	10	11	21	} Adolescence, -	33
- 25	3	9	12		
- 30	8	7	15	} Early maturity, -	46
- 35	5	5	10		
- 40	6	5	11		
- 45	7	3	10	} Late maturity, -	17
- 50	4	1	5		
- 55	8	—	8		
- 60	3	1	4		
72			58	130	



## PULMONARY TUBERCULOSIS.

92 cases were of pulmonary type. Under the Turban-Gerhardt classification the cases are divided into three groups, according to the stage of disease present on admission, and the following tables give certain clinical information relative to each group. In Group I there were 17 cases; in Group II, 24 cases; and in Group III, 51 cases. There were 9 deaths, all of which were in Group III.

*Duration of Illness.*—The following table shows the duration of illness on admission, stated in monthly periods:—

		Months,	1-3	3-6	6-12	12-18	18-24	Over 24	Total.
No. of Patients,	Group I, -		1	4	5	2	—	5	17
	Group II, -		—	1	4	2	1	16	24
	Group III, -		—	4	6	7	5	29	51
	Total, -		1	9	15	11	6	50	92

*Earliest Manifestations Recognised.*—The cases are classified according to the nature of the earliest recognised manifestation of illness:—Cough, 43; pleurisy, 12; influenza, 10; lassitude, 8; loss of weight, 6; hæmoptysis, 5; pneumonia, 5; amenorrhœa, 1; indigestion, 1; not recorded, 1—total 92.

*General Health relative to the Stage of Disease.*—This was found on admission to be favourable in all the cases in Group I, in 20 of the 24 cases in Group II, but only in 24 of Group III, there being in this group 27 cases whose general health was unsatisfactory.

*General Results and Duration of Residence.*—In the following table the cases in each group are classified according to their general condition on discharge, while below is given the duration of residence for each class stated in days:—

	No.	Arrested.	Improved.	Stationary.	Worse.	Died.
Group I,	17	8	7	2	—	—
Group II,	24	1	17	5	1	—
Group III,	51	—	24	8	10	9
Total,	92	9	48	15	11	9

*Duration of Residence in Days.*—

Average, -	-	-	123	90	45	67	48
Maximum, -	-	-	232	455	159	89	139
Minimum, -	-	-	61	19	5	6	8

*Complications.*—In 37 cases—9 in Group I, 9 in Group II, and 19 in Group III—one or more complications were present. In 14 instances the complication was of a non-tuberculous nature, viz., 5 cases of cardiac valvular disease, 3 of rheumatism, 2 of hæmorrhoids, and 1 each of pregnancy, lateral sclerosis, ozæna, and trachoma. The 23 cases complicated by some tuberculous lesion other than pulmonary were as follows:—Laryngitis, 7; cervical adenitis, 5; ischio-rectal abscess, 3; ophthalmia, 4; and 1 each of disease of rib, sternum, kidney, and ovary. The 3 ischio-rectal and 5 of the laryngeal cases occurred in patients in Group III, as did also the tuberculous disease of rib and of kidney, as well as 2 of the cases of cervical adenitis. 2 of the cases in Group II had laryngitis, 1 had enlarged cervical glands, 1 had ophthalmia, and one disease of the sternum.

*Sputum Examination.*—The following table shows the results of sputum examinations:—

	T.B. +	T.B. -	No spit.	Not examined.
Group I, - -	—	8	9	—
Group II, - -	13	10	1	—
Group III, -	36	8	3	4
	49	26	13	4

The 3 cases in Group III who had no spit were in a dying condition, while in the 4 cases where the spit was not examined the cases were so advanced as to make bacteriological examination quite uncalled for. Assuming those to be “open” cases, this gives a total of 56 with T.B. in the spit. In a number of instances where ordinary smear examination was done with negative result animal inoculation was performed, but the results of this procedure did not differ in any case from the results obtained by smears.

A family history of tuberculosis was obtained in 6 cases in Group I, in 9 in Group II, and in 14 in Group III.

At the end of their period of sanatorium treatment a number of patients were considered fit for transfer to Hairmyres Colony, either for training in suitable outdoor work in the case of adults or for open-air schooling in the case of children. In 9 instances transfer was effected, but in some other cases was prevented either by a desire on the part of the adult to return to work at home for economic reasons or on the part of parents by a desire to have back in the family circle children who to all outward appearance had made a

perfect recovery. This latter difficulty can be met by appealing to the sense of parental responsibility, but the first-mentioned difficulty has so far proved unsurmountable, and must remain so until adequate provision is made for the patient's dependents, while he himself is recovering his health and is being taught an occupation to which he can turn with safety in after-life.

When the sanatorium was closed for the treatment of tuberculosis in September to make room for cases of smallpox 28 cases had to be discharged prematurely, 21 being sent back to their own homes, where they were kept under observation by the outdoor staff, and 7 being transferred to other Middle Ward institutions. The patients transferred were those too ill to be returned home.

#### NON-PULMONARY TUBERCULOSIS.

The cases of non-pulmonary tuberculosis numbered 28, and may be grouped as follows:—Abdominal, 9; cervical adenitis, 7, bones and joints, 6; multiple lesions, 3; lupus, 1; tuberculous disease of kidney, 1; general tuberculosis, 1.

*Abdominal Tuberculosis.*—4 of the patients were adults, whose ages ranged from 18-30 years, and 5 were children at ages from 3 to 7 years. The results of treatment were disappointing in that only in 1 case—a girl of 6 years—was the disease arrested, while in 3 cases—1 child and 2 adults—the condition was improved; in 2 cases there was no appreciable change, while in 3 the disease became worse. No deaths occurred.

2 of the adult cases had had laparotomy performed in general hospital prior to admission to sanatorium, and in one case the disease was quite unaffected, while in the other the principal result was the production of fæcal fistula. 3 of the cases had signs suggestive of pulmonary mischief. In 2 of the children, both aged 4 years, the disease followed soon after an attack of measles. The average duration of treatment was 51 days, the maximum 108, and the minimum 21. The last mentioned was in the case of a child who was almost in a dying condition on admission, and who was taken home by his mother.

*Cervical Adenitis.*—7 cases—1 adult of 22 years, and 6 children aged from 7 to 9 years. The duration of illness varied from 2 months to 6 years. The general health in each case was favourable, and all the cases ultimately did well, though 2 had to be transferred to the County Hospital, Motherwell, for operative interference. The other

5 cases were discharged without any evidence of active disease, and in 2 instances almost all evidence of glandular enlargement has disappeared. The adult case had an old-standing lupus of the face, and 2 of the children had tuberculous ophthalmia. The average length of treatment was 75 days. 1 of the children was transferred to Hairmyres.

*Bones and Joints.*—6 cases, classified as follows:—Spinal caries, 2; elbow joint, 2; hip joint, 1; dactylitis, 1.

One case of spinal caries was in a girl aged 17, who developed the disease following a fall down stairs. She had marked scoliosis, which improved considerably, but she was taken home by her parents while the disease was still active. The other case was in a child of 6 years, who had pronounced kyphosis, and who had paralysis of both lower limbs, with complete loss of control of the sphincters; after 10 days' residence she was transferred to Stonehouse Sanatorium, the accommodation being required for smallpox patients.

Both cases of disease of the elbow joint were in young children. The result of treatment was good in one case, the child being discharged with a fair range of movement of the joint and with the disease arrested, but in the other case the disease remained active, and was complicated by dactylitis of both hands.

The case of hip-joint disease occurred in a child of 4 years, who was taken home by her parents after being in sanatorium for only 28 days, while the case of dactylitis, which was of 6 months' duration, in a boy of 2 years, was transferred to the County Hospital, Motherwell, for operation, after a residence of 32 days. He was subsequently readmitted, and was discharged during the current year without any evidence of active disease.

*Group IV.*—In the 10 cases found not to be suffering from tuberculosis the revised diagnosis was:—Bronchitis, 4 cases; bronchitis and asthma, 2; malnutrition, 1; streptococcal empyema, 1; mucous colitis, 1; unresolved pneumonia, 1.



### Hairmyres Colony.

*Resident Physician-Superintendent,* - A. H. MACPHERSON, L.R.C.P. & S.  
*Matron,* - - - - - Miss GRAY.

#### PATIENTS TREATED.

Year.	In Residence, 1st Jan.	Admitted during year.	Discharged during year.	In Residence, 31st Dec.
1920, - - -	90	257	223	124

#### PATIENTS CLASSIFIED ACCORDING TO PARISH OF RESIDENCE.

##### (a) *Middle Ward.*

Avondale, - - -	—	Dalserf, - - -	7
East Kilbride, - - -	1	Dalziel, - - -	2
Glasford, - - -	—	Hamilton, - - -	3
Stonehouse, - - -	1	New Monkland, - - -	3
Blantyre, - - -	25	Old Monkland, - - -	7
Bothwell, - - -	32	Shotts, - - -	19
Cambuslang, - - -	38	Total, - - -	141
Cambusaethan, - - -	3		

##### (b) *Other Districts and Burghs in County.*

Upper Ward, - - -	8	Burghs—Airdrie - - -	13
Lower Ward, - - -	17	Hamilton, - - -	4
City of Glasgow, - - -	3	Motherwell, - - -	2
		Rutherglen, - - -	9
		Total, - - -	56

##### (c) *Outwith the County.*

Ayrshire, - - -	6	Perthshire, - - -	1
Dumbartonshire, - - -	3	Renfrewshire, - - -	3
Dumfriesshire, - - -	1	Selkirkshire, - - -	1
Fifeshire, - - -	5	Sutherlandshire, - - -	1
Forfarshire, - - -	2	Manchester, - - -	1
Midlothian, - - -	1	Wolverhampton, - - -	1
		Total, - - -	26

Grand Total, - - - 223

*Nature of Disease.*—Of the 223 patients discharged during the year, 213 proved to be tuberculous. In 154 cases the disease was of pulmonary type, while in 59 it was non-pulmonary. The condition present in the remaining 10 were:—Bronchitis, 3; post-nasal adenoids, 2; debility, 1; rickets, 1; and perforating ulcer of the transverse colon, 1. 2 adults were admitted for observation, but no tuberculous lesion was detected.

# PULMONARY TUBERCULOSIS.

## AGE AND SEX DISTRIBUTION.

Quinquennial Periods.		Males.	Females.	Both Sexes.	Age Groups.
Under 5,	- -	2	—	2	Pre-School Age.
„ 10,	- -	10	15	25	} School Age.
„ 15,	- -	10	14	24	
„ 20,	- -	11	7	18	} Adolescence.
„ 25,	- -	24	4	28	
„ 30,	- -	14	3	17	} Early Maturity.
„ 35,	- -	12	—	12	
„ 40,	- -	13	—	13	
„ 45,	- -	7	—	7	
„ 50,	- -	5	—	5	} Late Maturity.
„ 55,	- -	2	—	2	
„ 60,	- -	—	1	1	
Total,	- -	110	44	154	

*Duration of Illness.*—It has to be observed from the undernoted table that, as in former years, the disease has frequently been of long standing before admission to the Colony. That this should continue year after year is unfortunate, and is apt to reflect seriously on the results of treatment, but the figures given below compare favourably with the corresponding figures relating to other tuberculosis institutions in the County:—

Duration in Months.	Number of Patients.	Duration in Years.	Number of Patients.
1-3	8	1-2	41
3-6	18	2-4	34
6-12	37	Over 4	16

Total—154.

## INITIAL SYMPTOM OF ILLNESS.

Cough, - - -	55	Lassitude, - - -	35
Pleurisy, - - -	27	Loss of Weight, - - -	14
Blood-stained Sputum, -	6	Anæmia, - - -	4
Hæmoptysis, - - -	13	Total, - - -	154

## RESULT OF TREATMENT.

The classification adopted is that of Turban-Gerhardt.

Stage of Disease.	Number of Patients.	T.B. Present.	Arrested.	Improved.	No change.	Worse.
I,	122	10	86	23	12	1
II,	22	17	6	9	3	4
III,	10	8	1	1	3	5
Totals, -	154	35	93	33	18	10

It has to be noted that all the children—51 in number—suffering from pulmonary tuberculosis were in Stage I of the disease.

*Complications.*—The undernoted table shows complications present in different stages of the disease:—

Complications.	Stage I.	Stage II.	Stage III.	Total.
Asthma, - - -	1	1	—	2
Bronchitis, - - -	1	—	—	1
Pleurisy, with effusion, - - -	1	—	—	1
Empyema, - - -	—	1	—	1
Hæmoptysis, - - -	—	1	1	2
Cardiac Valvular Disease, - - -	2	—	—	2
Rheumatic Fever, - - -	1	—	—	1
Rheumatoid Arthritis, - - -	1	—	—	1
Arterio-Sclerosis, - - -	1	—	—	1
Neurasthenia, - - -	3	—	—	3
Gastric Ulcer, - - -	1	—	—	1
Otitis Media, - - -	1	—	—	1
Ischio-rectal Abscess, - - -	3	—	—	3
Fistula-in-Ano, - - -	1	1	—	2
Ozæna, - - -	1	—	—	1
	18	4	1	23

## DURATION OF RESIDENCE IN DAYS.

Stage of Disease.	Average.	Maximum.	Minimum.
I, - - -	153	763	1
II, - - -	166	415	24
III, - - -	95	190	20

## NON-PULMONARY TUBERCULOSIS.

59 patients received treatment for non-pulmonary tuberculosis.

## AGE AND SEX DISTRIBUTION.

Quinquennial Period.	Males.	Females.	Both Sexes.	Age Groups.
Under 5, - -	1	1	2	Pre-School Age.
„ 10, - -	15	20	35	} School Age.
„ 15, - -	8	5	13	
„ 20, - -	5	2	7	} Adolescence.
„ 25, - -	1	—	1	
„ 30, - -	1	—	1	Early Maturity.
Totals, - -	31	28	59	

The following table shows the result of treatment according to the nature of the disease:—

Site.	Arrested.	Improved.	No Change.	Total.
Gland—				
Cervical Region, - -	27	9	5	41
Joints—				
Hip Joint, - - -	3	—	—	3
Osseous, - - -	4	—	—	4
Spine—				
Cervical Region, - -	1	—	—	1
Dorsal Region, - -	3	3	3	9
Eyes (Cornea), - - -	1	—	—	1
Totals, - - -	39	12	8	59

Of the 121 adult males admitted during the year for concurrent treatment and training, 42 entered for training in market gardening, 32 for training in poultry farming, 15 for training in forestry, 6 for pig rearing, and 3 for general farming. 23 were physically unfit for systematic training without prejudice to their condition, but were engaged in occupational therapy.

Included in the patients discharged during the year were 72 ex-Service men. Of that number 50 were in Stage I, 15 in Stage II, and 2 in Stage III. One man was suffering from cervical adenitis, and two were admitted for observation, but no tuberculous lesion was discovered. The remaining two were suffering from bronchitis.

#### THE OPEN-AIR SCHOOL.

This section of the work forms an important part in the activities of the Colony.

It is realised that the health of each child makes the chief demand on the direction of the school. While rest is imperative in many cases, education is not lost sight of. An individual study is made of the case of each patient, and methods are adopted accordingly.

Perhaps no finer illustration of the effect of mind over body is to be found than in the success attained by education in recovery of health of the tuberculous child. Indeed, so striking is the improvement in the physical condition as the result of change of environment and education that it is inconceivable to think that any Colony in the midst of a large industrial area could be deemed complete without the open-air school.



## COUNTY HOSPITAL, BELLSHILL.

### REPORT FOR THE YEARS 1919 AND 1920.

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<i>Physician-Superintendent,</i>	·	-	HENRY J. THOMSON, M.B., Ch.B.
<i>Consulting Surgeon,</i>	-	-	SAMUEL J. CAMERON, F.R.F.P.S.
<i>Anæsthetist,</i>	-	-	JOHN A. C. GUY, M.B., Ch.B.

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In the Report for the years 1914-1919 a short description is given of the various uses to which this Institution has been put. It will be seen that to some extent, during the years 1917-1918, institutional treatment for mothers and children was undertaken, and in the early part of 1919 the accommodation was set apart exclusively for Maternity and Child Welfare work.

*Buildings and Grounds.*—The Institution is conveniently situated on the main road between Bellshill and the Burgh of Coatbridge, and about one mile from the former town.

The grounds extend to about three acres. The buildings consist of an administrative block and three ward pavilions, while the out-buildings include a steam laundry and a steam disinfecter. Pavilion I has accommodation for 14 beds and 6 cots; Pavilion II has 4 cubicles, used for isolation and observation purposes, while the remaining portion of this latter pavilion is utilised as a labour room. Pavilion III has accommodation for 20 beds.

At first it was anticipated that normal confinements only would be dealt with, but it soon became evident that provision would require to be made for complicated cases of pregnancy and labour, and with this end in view the labour room in Pavilion II was equipped on up-to-date lines, with an operating Guyot-Greville table, a labour bed, steam sterilizers for dressings, instruments, &c., and a complete outfit of surgical appliances.

*Staff.* — The medical staff is non-resident, and consists of a physician-superintendent, a consulting surgeon, and an anæsthetist. The indoor staff consists of a matron, 2 sisters, 3 staff nurses, 5 probationers, and 7 maids. In addition to their being general trained, the matron and sisters are each in possession of the C.M.B. certificate. A gardener-attendant and 2 assistants are employed in the grounds, boiler-house, &c.

As the work at the Institution increased, some difficulty was found in providing accommodation for the staff of nurses and maids, and

during the current year the Committee have had before them proposals for the erection of a Nurses' Home.

*Patients Treated.* — The number of patients dealt with in the hospital during each of the two years is shown in the following table, and the results of treatment are also given:—

TABLE MIII.

	In Residence on 1st Jany.	Admitted.	Discharged.	CONDITION ON DISCHARGE.				In Residence on 31st Dec.
				Well.	Stationary.	Worse.	Died.	
1919.								
Mothers—								
Ante-Natal—								
For Treatment,	—	14	13	6	5	2	—	1
For Confinement,	2	40	34	32	1	—	1	8
Post-Natal, -	2	17	15	14	1	—	—	4
Gynæcological, -	—	4	3	2	1	—	—	1
Children, - -	9	117	91	39	25	10	17	35
	13	192	156	93	33	12	18	49
1920.								
Mothers—								
Ante-Natal—								
For Treatment,	1	31	30	29	1	—	—	2
For Confinement,	8	111	110	98	5	5	2	9
Post-Natal, -	4	30	30	23	5	2	—	4
Gynæcological, -	1	22	21	17	3	1	—	2
Children, - -	35	159	180	133	16	7	24	14
	49	353	371	300	30	15	26	31

*Infants Born in Hospital.*—In addition to the cases referred to in the previous table, there were born in the hospital 32 infants during 1919, and 116 during 1920:—

Year.	In Residence on 1st Jany.	INFANTS BORN.		DISCHARGED.		In Residence on 31st Dec.
		Alive.	Still-born.	Well.	Died.	
1919, -	2	30	2	22	5	5
1920, -	5	110	6	105	6	4

*Place of Residence.*—The localities from which the patients were admitted were in most cases within the Middle Ward District, but several came from the other two Wards of the County, and a few from neighbouring Burghs. The distribution according to parish

is shown in the following table, which also gives the reasons under which the cases were admitted:—

TABLE MIV.

	MOTHERS.								CHILDREN.			
	ANTE-NATAL											
	For Treatment.		For Confinement.		Post-Natal.		Gynæcology.		Under 5 years.		Total	
	1919.	1920.	1919.	1920.	1919.	1920.	1919.	1920.	1919.	1920.	1919.	1920.
MIDDLE WARD—												
Avondale, -	—	—	—	1	—	—	—	—	—	—	—	1
East Kilbride, -	—	1	—	6	—	1	—	—	—	—	—	8
Glasford, -	—	—	—	1	—	—	—	—	1	3	1	4
Stonehouse, -	—	1	—	2	1	—	—	—	4	1	5	4
Blantyre, -	4	9	18	43	5	11	—	3	33	42	60	108
Bothwell, -	5	6	9	25	7	6	2	11	32	34	55	82
Cambuslang, -	1	4	3	12	3	4	—	5	15	38	22	63
Cambusnethan, -	—	1	—	1	—	1	—	—	1	5	1	8
Dalserf, -	—	4	1	3	1	3	2	3	13	11	17	24
Dalziel, -	—	—	—	—	—	—	—	—	1	1	1	1
Hamilton, -	—	1	2	4	—	1	—	—	—	3	2	9
New Monkland, -	—	—	—	—	—	—	—	—	—	2	—	2
Old Monkland, -	—	2	—	—	—	—	—	—	—	5	—	7
Shotts, -	1	1	2	4	—	1	—	—	8	7	11	13
UPPER WARD, -	1	—	3	8	—	1	—	—	7	4	11	13
LOWER WARD, -	1	1	1	—	—	1	—	—	—	1	2	3
RUTHERGLEN BURGH, -	1	—	—	—	—	—	—	—	1	2	2	2
MOTHERWELL BURGH, -	—	—	1	1	—	—	—	—	—	—	1	1
LANARK BURGH, -	—	—	—	—	—	—	—	—	1	—	1	—
	14	31	40	111	17	30	4	22	117	159	192	353

The ages of the mothers and children admitted during the two years are given below in age groups:—

		Years.					Over	
		-20	20-25	25-30	30-35	35-40	40	Total.
Mothers—								
1919,	-	5	28	12	11	15	4 =	75
1920,	-	31	56	36	37	21	13 =	194
		Months.			Years.			
		-3	3-6	6-12	1-2	2-3	3-4	4-5 Total.
Children—								
1919,	-	19	11	19	35	15	11	7 = 117
1920,	-	33	26	20	42	22	9	7 = 159

*Duration of Treatment.*—Dealing with the cases treated during the year 1920, the average duration of residence was 32·2 days.

With reference to confinements, 9 complicated cases were admitted shortly before or while they were actually in labour, and their average residence in hospital was 29·7 days. The cases of normal confinement had an average residence of 35·8 days, and this apparently long period is due to their having been admitted in many instances several days or weeks before confinement, owing to conditions at home being unsatisfactory. After confinement the average period of residence for all cases was 15·9 days.

In ante-natal cases admitted for treatment, the residence was, on the average, 14·6 days.

The average duration of residence for post-natal conditions, gynæcological conditions, and in the case of children under 5 years of age, was 21·5, 18, and 48·4 days respectively.

*Nature of Cases dealt with. — Ante-Natal.* — Reference to Table M-III shows that during 1919 the total ante-natal cases in residence numbered 56. 42 cases which were admitted for confinement were normal clinically, and all were discharged well, with the exception of 1, where death occurred from cardiac disease. In addition to these, 14 expectant mothers received treatment, 11 of them for debility during pregnancy, 1 for pemphigus, 1 for nephritis, and 1 for threatened abortion. These latter cases were not confined in the institution.

During 1920, 151 cases were dealt with. 116 confinements took place, delivery being normal in 94 cases, instrumental in 21, while in one instance Cæsarean section had to be resorted to. In 9 cases complications were present, as follows:—Albuminuria, 1; hydatid mole, 1; nephritis, 1; pemphigus, 1; ante-partum hæmorrhage, 1; phlebitis, 2; eclampsia, 1; and pernicious anæmia, 1. 2 deaths occurred, viz., 1 from eclampsia and 1 from pernicious anæmia. In the remaining 35 cases confinement did not take place, the patients being admitted purely for ante-natal treatment; 27 of these cases were suffering from general ill-health and debility, while in the remaining 8 there were complications present, as follows:—Cardiac disease, 1; threatened abortion, 2; pernicious vomiting, 3; eclampsia, 1; and insanity of pregnancy, 1.

The nature of the presentation and the delivery at confinement for cases dealt with during 1920 is shown below:—

	PRESENTATION.						
	Vertex.						
<i>Delivery—</i>	L.O.A.	R.O.P.	L.O.P.	R.O.A.	Face.	Breach.	Total.
Manual, -	84	2	1	—	3	4	94
Instrumental, -	15	1	4	1	—	—	21
Cæsarean Section,	1	—	—	—	—	—	1
	100	3	5	1	3	4	116

*Post-Natal.*—During 1919, 18 post-natal cases were admitted, 16 of which were suffering from debility, 1 from abscess of breast, and 1 from puerperal insanity.

During 1920, of the 34 post-natal cases in residence, 24 received treatment on account of debility following confinement. The other 10 were cases of—Anæmia, 4; vesico-vaginal fistula, 1; post-partum hæmorrhage, 2; puerperal eclampsia, 1; \*puerperal fever, 1; and hepatic abscess, 1.

*Gynæcological.*—In 1919, 4 gynæcological cases received treatment, 2 of which suffered from menorrhagia, 1 from ovaritis, and 1 from vaginitis.

During 1920, 23 cases were dealt with, viz.:—Prolapse of uterus, 4; laceration of cervix, 2; uterine hæmorrhage, 8; chronic endometritis, 6; cystic ovary, 2; uterine fibroids, 1.

Table M-V shows the total number of children dealt with in the institution during 1919 and 1920 respectively, together with the reasons for admission and the condition on discharge.

TABLE M-V.

REASON OF ADMISSION.	Total Cases		DISCHARGED.				Still in	
	Treated.	Well.	Stationary.	Worse.	Died.	Hospital.		
<i>Year 1919.</i>								
Nutritional Diseases—								
General, - -	27	6	4	—	7	10		
Rickets, - .	8	3	2	1	—	2		
Enteritis, - -	7	3	3	—	—	1		
Respiratory Disease, -	3	2	—	—	1	—		
Skin Disease, - -	11	5	3	1	—	2		
Tuberculous Disease, -	12	3	4	—	3	2		
Eye Disease, - .	2	—	1	—	—	1		
Spina Bifida, -	1	—	—	—	1	—		
Poliomyelitis, - .	1	—	—	—	—	1		
Rheumatoid Arthritis,	1	—	—	—	—	1		
Mental, - -	1	—	—	—	1	—		
Other Causes, - -	52	17	10	10	4	11		
	126	39	27	12	17	31		

\* Transferred to County Hospital, Motherwell.



TABLE M-V.—continued.

REASON OF ADMISSION.	Total Cases		DISCHARGED.			Died.	Still in Hospital.
	Treated.	Well.	Stationary.	Worse.			
<i>Year 1920.</i>							
Nutritional Diseases—							
General, - -	61	35	7	4	11	4	
Rickets, - -	13	9	2	1	1	—	
Enteritis, - -	25	20	1	—	1	3	
Convulsions, - -	1	1	—	—	—	—	
Respiratory Disease, -	2	—	—	—	1	1	
Skin Disease, - -	21	16	—	—	3	2	
Tuberculous Disease, -	5	3	—	—	2	—	
Eye Disease, - -	4	3	1	—	—	—	
Ear Disease, - -	1	1	—	—	—	—	
Spina Bifida, - -	1	—	—	—	1	—	
Poliomyelitis, - -	1	—	1	—	—	—	
Rheumatoid Arthritis,	1	—	1	—	—	—	
Talipes, - - -	1	—	1	—	—	—	
Hydrocephalus, - -	1	—	—	—	—	1	
Observation, - -	1	—	1	—	—	—	
Other Causes, - -	55	42	5	2	4	2	
	194	130	20	7	24	13	

With reference to the children admitted under the designation "Other Causes," it has to be explained that the great majority were taken into hospital because there was no responsible person to look after the child at home, the admission therefore being regarded as equivalent to the infant being boarded-out.

*Deaths.*—During 1919 the deaths in the institution numbered 23, there being 22 among children and 1 adult. In 1920, 32 deaths occurred, 30 of these being of children and 2 of adults. Included in the above are 5 deaths which occurred in 1919 of infants born in hospital, and 6 deaths of a similar nature during the following year.

**COUNTY CONVALESCENT HOME,  
CALDERBANK HOUSE.**

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<i>Physician-Superintendent,</i>	-	-	-	JAMES PHILP, L.R.C.P. & S.
<i>Matron,</i>	-	.	.	Miss GRACE M'NEILL.

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*Building and Grounds.*—Calderbank House, originally built as a mansion house, was purchased by the Middle Ward District Committee, in the spring of 1920, from the United Collieries Limited, as a convalescent home for expectant and nursing mothers and for children under 5 years of age, its purpose being to serve as an accessory both to the various Maternity and Child Welfare Centres and to the Maternity Hospital at Bellshill. Entry was obtained in May, various alterations and improvements, including the installation of central heating, were carried out, and the Home was opened for the admission of patients on 12th August.

The institution, situated on a southern slope near the village of Baillieston, is a three-storey building, and is surrounded by about ten acres of ground, partly wooded and partly laid out as gardens. Accommodation was at first provided for 10 mothers and 12 children, but during the current year arrangements have been under consideration to increase the adult accommodation to 20.

*Staff.*—The Physician-Superintendent is non-resident. The indoor staff consists of a matron, who, in addition to being general trained, has had considerable experience as a Nurse Health Visitor, and possesses the C.M.B. certificate; a sister, 3 probationers, and 3 maids. On the outdoor staff are a gardener-attendant and two assistants.

*Patients treated.*—From the opening of the Home on 12th August, till the end of the year, 30 mothers and 50 children were admitted, and 23 mothers and 32 children were discharged, leaving 7 mothers and 18 children in residence on 31st December. One child was born in the institution.

*Place of Residence.*—Of the 80 cases admitted, 76 resided in the Middle Ward District and 4 in the Lower Ward District. The places of residence of the Middle Ward cases, according to Parish, were as follows:—Avondale, 7; Blantyre, 24; Bothwell, 26; Cambuslang, 10; Dalserf, 3; Old Monkland, 2; and Shotts, 4.

29 of the cases were transferred to the Home from Bellshill Hospital, while the admissions of the others were arranged through the following Child Welfare Centres, viz.:—Baillieston, 4; Bellshill, 13; Blantyre, 17; Cambuslang, 8; and Uddingston, 5.

*Reasons for Admission.*—In the case of mothers, the reasons for admission were—Ante-natal debility, 6; post-natal debility, 12; anæmia, 6; and uræmia, 1. The children were admitted for the following conditions:—Debility, 44; anæmia, 5; gastro-intestinal disturbance, 3; and rickets, 3.

*Duration of Residence.*—The average duration of residence was 34 days for mothers and 47 days for children.

*Result of Treatment.*—Treatment was carried out almost entirely on hygienic and dietetic principles only, and the results were satisfactory.

## MIDWIVES (SCOTLAND) ACT, 1915.

*(This has already been printed as a separate Report.)*

## STAFF.

**Administrative Officer.**

JOHN T. WILSON, M.D., D.P.H.

**Executive Officers and Inspectors of Midwives.**

J. THOMSON DICK, M.B., Ch.B., D.P.H.

JAMES JOHNSTONE, M.B., Ch.B., D.P.H.

HENRY J. THOMSON, M.B., Ch.B.

JAMES PHILP, L.R.C.P. &amp; S.(Ed.).

JOHN A. C. GUY, M.B., Ch.B.

**Nurse Health Visitors and Assistant Inspectors of Midwives.****(All hold the C.M.B. Certificate.)**

HELENA STRATH.

JEAN F. ROSS.

MARGARET STEWART.

MARGARET ARNOT.

CATHERINE ROBERTSON.

JEAN BAIRD.

MARGARET MORTON.

LILY MARTIN.

ANNIE HARDIE.

HELEN C. KEEGANS.

ISABEL W. TAYLOR.

JANET B. SUMMERS.

MARGARET MACAULAY.

KATE SANDERSON.

KATHERINE CURRAN.

MYRA E. SMITH.

MARGARET MACGREGOR.

## COUNTY OF LANARK.

## DISTRICT OF THE MIDDLE WARD.

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*MIDWIVES (SCOTLAND) ACT, 1915.*

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## Fourth Annual Report by the Medical Officer of Health, 1920.

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The Medical Officer of every Local Authority shall report annually to that Authority on the administration of the Act within the District of the Local Authority, and he shall transmit a copy of such report to the Central Midwives Board and to the Local Government Board for Scotland.—*Section 23.*

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**Staffing Arrangements.**—The staff of Medical Officers and Nurse Health Visitors will be found on the previous page, where the names are arranged according to seniority. Two of the Medical Officers are engaged entirely in connection with maternity and child welfare work, while three give part of their time to this service. The staff of Nurse Health Visitors continues to be 17 in number. Four appointments have been made during the year to fill vacancies caused by the transfer of the senior Nurse Health Visitor and the resignation of three others.

**Practising Midwives.**—During the year 238 certified midwives (200 resident within and 38 resident outwith the Middle Ward) notified their intention to practise. Compared with last year, this is an increase of 4. A considerable number of confinements were attended by women not certified under the Act, but if comparison be made with previous Reports it will be found that there has been a steady decline in the figures relative to such confinements—the figures for the years 1917-1920 being 339, 204, 180, and 174 respectively.



The qualifications of the practising midwives are as follows:—

	1917.	1918.	1919.	1920.
Certificate of the Central Midwives Board (Scotland), ... ..	22	35	36	45
Certificate of the Central Midwives Board (England), ... ..	2	2	2	2
Trained and certified by the Royal Maternity Hospital (Glasgow), ... ..	8	7	7	7
Trained and certified by the Royal Maternity Hospital (Edinburgh), ... ..	2	1	1	1
In <i>bona fide</i> practice and certified under the Act,	176	202	188	183
	<hr/>	<hr/>	<hr/>	<hr/>
	210	247	234	238
	<hr/>	<hr/>	<hr/>	<hr/>

**Change of Address.**—Three certified midwives removed from the district during the year, one going to the Burgh of Hamilton, and two abroad.

**Deaths.**—The deaths of four midwives (Nos. 57, 69, 82, and 100) were reported.

**Resignation.**—One certified midwife intimated that she did not intend to continue in practice.

In accordance with Section 16 (5) of the Act, the necessary intimations were duly made to the Secretary of the Central Midwives Board.

**Disciplinary Cases.**—The case of a midwife who, in connection with the occurrence of puerperal fever in one of her patients, had contravened certain of the C.M.B. Rules, was reported to the District Committee, who deemed it desirable that steps should be taken to have her name removed from the roll of midwives. At a meeting of the Central Midwives Board during the current year the whole circumstances were considered, and the Board agreed to remove the name from the roll, and, further, to prohibit the midwife from attending cases in any other capacity.

Several instances of unsatisfactory practice were reported by the Assistant Inspectors of Midwives, and a number of midwives were interviewed at the Public Health Department by members of the medical staff, when their conduct of cases was carefully gone into. These, however, were not of such a nature as to warrant a report being sent to the Central Midwives Board.

**Attendance at Confinement.**—During the year 7,562 births were registered, and the births of 7,507 living children were notified, being 99·2 per cent. of those registered. In addition, notifications were received of 211 still births, giving a total notification figure of 7,718. Of the total births notified 3,977, or 51·6 per cent., were attended by doctors; 3,567, or 46·2 per cent., were attended by certified midwives; and 174, or 2·2 per cent., were attended by handy-women. The average number of confinements attended by certified midwives was 14·9. Four midwives had each over 100 cases (187, 142, 120, and 118 respectively); 20 had from 50 to 100 each; 41 from 20 to 50 each; and 124 from 1 to 20 each. 11 midwives had no cases during the year.

The following table gives, according to Parish, the number of midwives practising within the Middle Ward, the births notified, and the person in attendance at the confinement:—

TABLE I.—SHOWING THE NUMBER OF MIDWIVES, BIRTHS NOTIFIED, AND THE ATTENDANCE AT CONFINEMENTS AS INDICATED IN THE NOTIFICATION FORM.

PARISH.					Number of Midwives.	Births Noti- fied.	ATTENDANT AT CONFINEMENT.		
							Doctor.	Midwife.	Handy- woman.
Avondale,	...	...	...	1	137	135	1	1	
East Kilbride,	...	...	...	—	99	93	4	2	
Glasford,...	...	...	...	2	42	38	3	1	
Stonehouse,	...	...	...	5	122	61	60	1	
Blantyre,	...	...	...	16	753	164	585	4	
Bothwell,	...	...	...	66	2,212	985	1,195	32	
Cambuslang,	...	...	...	17	828	369	454	5	
Cambusnethan, ...	...	...	...	18	601	476	101	24	
Dalserf, ...	...	...	...	30	681	417	237	27	
Dalziel, ...	...	...	...	1	88	50	36	2	
Hamilton,	...	...	...	3	279	96	132	51	
New Monkland,	...	...	...	20	516	208	303	5	
Old Monkland, ...	...	...	...	16	660	265	384	11	
Shotts, ...	...	...	...	5	700	620	72	8	
Midwives resident outwith District, 38					—	—	—	—	
Total, ...					238	7,718	3,977	3,567	174

**Inspection of Midwives.**—The routine inspections made to the homes of the 200 midwives resident within the District numbered 565, including 84 visits where the women were not available for inspection. In addition, 13 special inspections were made.

The reports of the Assistant Inspectors showed that the personal conditions of the midwives in 176 instances were good; in 19 instances fair; while 5 were unsatisfactory.

In 179 cases the homes, when visited, were found to be in good condition; while 18 were fair and 3 unsatisfactory.

The equipment was reported to be incomplete in a certain number of cases, though there is some evidence of improvement in this direction. 29 midwives were without bags, as compared with 37 last year; while of those having bags 3 had no linings, as compared with 4 last year. In 16 cases the midwives did not possess washable dresses and aprons; 21 were without nail brushes; and 23 had no scissors. If previous figures be compared it will be seen that there is a steady improvement in the provision of equipment. It would appear that there is still much difficulty experienced in keeping the temperature charts, but that this difficulty is being overcome is evidenced by the fact that the number of midwives who kept their charts in proper order during the year was 102 as compared with 81 in 1919. This is largely due to persistent teaching on the part of the Assistant Inspectors, though in spite of their efforts there still remain 38 midwives who have not provided themselves with thermometers. In the majority of those 38 cases the failure to provide thermometers is due to a lack of confidence on the part of the midwife to use the thermometer properly, or is attributable to the fact that she can neither read nor write.

Inspection of the registers appeared to show that there was a tendency on the part of some midwives to neglect the keeping of those records. Of the 200 midwives inspected, however, the registers of 163 were found to be kept satisfactorily.

**Medical Assistance.**—In accordance with the rules laid down by the Central Midwives Board, requiring midwives to call medical aid for any abnormal circumstances in connection with pregnancy, confinement, or the puerperium, the following table shows that in 146 instances assistance was sought. This is a decrease of 21 on last year's figures.

TABLE II.—SHOWING THE RECORDS OF SENDING FOR MEDICAL ASSISTANCE, CLASSIFIED ACCORDING TO PARISH AND THE CONDITIONS REQUIRING MEDICAL AID.

REASONS FOR MEDICAL ASSISTANCE.	Avondale.	East Kilbride.	Glasford.	Stonehouse.	Blantyre.	Bothwell.	Cambuslang.	Cambusnethan.	Dalserf.	Dalziel.	Hamilton.	New Monkland.	Old Monkland.	Shotts.	TOTAL.
MOTHER—															
Delayed labour,	—	—	—	—	31	9	7	—	1	—	—	2	1	—	51
Abnormal Pre-sentation,	—	—	—	—	4	3	1	—	—	—	—	2	—	—	10
Ante-partum Hæmorrhage,	—	—	—	—	2	3	—	—	—	—	—	—	—	—	5
Post-partum Hæmorrhage,	—	—	—	—	4	1	3	—	—	—	—	—	—	—	8
Adherent Placenta,	—	—	—	—	4	4	2	—	—	—	—	—	—	—	10
Abortion—actual or threatened,	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1
Torn Perineum,	—	—	—	—	6	3	8	—	—	—	—	—	—	—	17
Contracted Pelvis,	—	—	—	—	—	2	—	—	—	—	—	—	—	—	2
Pyrexia, ...	—	—	—	—	—	3	3	—	—	—	—	—	—	—	6
Uterine Inertia,	—	—	—	—	2	4	—	—	—	—	—	—	—	1	7
General Debility,	—	—	—	—	2	—	1	—	—	—	—	—	—	—	3
Eclampsia, ...	—	—	—	—	1	2	—	—	—	—	—	—	—	—	3
Rigor with rise of temperature	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1
Placenta Prævia,	—	—	—	—	—	1	1	—	—	—	—	—	—	—	2
Other causes, ...	—	—	—	—	—	4	—	—	—	—	—	—	—	1	5
CHILD—															
Ophthalmia, ...	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1
Still Birth, ...	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1
Premature Child,	—	—	—	—	2	2	1	—	—	—	—	1	—	—	6
Atelectasis, ...	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1
Other causes, ...	—	—	—	—	—	4	1	—	—	—	—	—	—	1	6
	—	—	—	—	59	46	31	—	1	—	—	5	1	3	146

**Payment of Doctors' Claims.**—The claims sent in by doctors under Section 22 of the Act numbered 10, and amounted to £6. The sum of £2 7s. was recovered by the Local Authority from the husbands or guardians of the patients.

**Puerperal Septicæmia.**—During the year, 60 cases of Puerperal Septicæmia were brought to the notice of the Department. Of the total, 32 or 53·3 per cent. occurred in the practice of medical practitioners, and 25 or 40·9 per cent. in the practice of certified midwives; 1 case was attended by a handy-woman and 2 cases reported from institutions.

**Still Births.**—The number of still births notified during the year was 211. Of these 158 or 74·9 per cent. were notified by medical practitioners; 49 or 23·2 per cent. by certified midwives and 4 or 1·9 per cent. by handy-women. There is a considerable difference in the percentage figures of the still births attended by doctors and midwives respectively, but it is safe to assume that in a certain proportion of cases originally attended by midwives, medical assistance had to be sought for some condition in the mother or child necessitating not only interference by skilled assistance, but also the infant being still born.

**Ophthalmia Neonatorum.**—The total number of cases notified during the year was 89. Of these 67 per cent. were notified by doctors; 20 per cent. by certified midwives and 13 per cent. were discovered in the district by the Nurse Health Visitors. Of the total cases, only 14 were reported due to gonococci. The reports of the Health Visitors showed that 11 of the cases were of a severe nature, and it was found desirable to remove 5 of these to the County Hospital, Motherwell, for treatment. The result of the treatment was as follows:—Recovery, 85; Slight Impairment, 1; Loss of Vision of One Eye, 1; Loss of Vision of Both Eyes, 2.

**Liability to be a Source of Infection.**—Ten notifications were sent in by midwives as to their liability to be a source of infection—on account of Scarlet Fever, 3; Ophthalmia Neonatorum, 1; Puerperal Fever, 5; and Sapræmia, 1. In each of the above cases, and also in all other cases of an infectious nature which occurred in the practice of midwives, steps were taken to ensure that the midwives carried out proper disinfection of person and outfit, and where necessary, suspension for 24 hours was ordered.

**Form of having Laid Out a Dead Body.**—Twelve notifications were received during the year, 5 being for mothers and 7 for infants.

**Notification of Death.**—Four notifications of the deaths of infants were received during the year.

JOHN T. WILSON.

DISTRICT OFFICES,  
HAMILTON, 31st May, 1921.



### III.—GENERAL SANITATION.

An account of the work under the headings of Houses Let in Lodgings; Tents, Vans, and Sheds; Workshops; Scavenging Private Streets; Nuisances; Interments, &c., will be found in the Report of the Sanitary Inspector, which is incorporated.

#### Housing.

Within recent years the problem of the provision of sanitary housing accommodation has become more clamant than ever, and with a view to providing a solution of this problem certain legislation has been evolved. This legislation is referred to in detail in the County Report.

The work undertaken during the year falls naturally into four groups:—

(1) Action taken by the Public Health Department, in the way of improving existing dwellings, more especially in connection with the abolition of midden privies and the introduction of inside water supply and modern conveniences. This is given in considerable detail in the report of the Sanitary Inspector, but the work done might be briefly summarised in the following statistical statement:—

Parish.	Proprietors. Dwellings.		Remedial Works.		Negotiations incompleted.
			Carried out.	In progress.	
Blantyre, -	4	621	89	—	532
Bothwell, -	11	1,330	24	90	1,216
Cambuslang, -	1	86	—	—	86
Cambusnethan,	3	221	—	10	211
Dalserf, -	5	187	6	18	163
Hamilton, -	1	43	—	—	43
New Monkland,	1	20	—	—	20
Old Monkland,	21	435	72	71	292
Shotts, - -	5	652	48	93	511
Total,	52	3,595	239	282	3,074
			3,595		

Owing to the abnormal expense involved in carrying out structural alterations and sanitary improvements, considerable

difficulty was experienced, yet a number of properties were dealt with, as shown above. With regard to the actual improvements carried out, the impracticability of insisting upon a normal standard of sanitary requirements, particularly with regard to the older houses, was fully realised, and discretionary powers were granted to the Medical Officer of Health by the Committee to negotiate with owners on the clear understanding that, where normal requirements were relaxed, the improvements accepted were only to be considered of a temporary nature, and were not to prejudice the Committee in calling for further improvements at a future date.

(2) Action taken by the Medical Officer of Health in the way of condemning houses unfit for human habitation. It has to be remembered that many of the dwellings are in such a condition as to be liable to be made the subject of a Closing Order, but nothing could be gained by taking such action in the absence of alternative accommodation for the tenants. In any case, the Housing (Additional Powers) Act, 1919, Section 6, nullifies such action.

(3) Buildings by private owners. This is shown in detail in the report of the Buildings Inspector.

(4) Post-war Housing Scheme of the District Committee in accordance with the Housing (Scotland) Acts, 1890-1920, and initiated by the Local Government Board for Scotland (now the Scottish Board of Health) in their circular letter dated 10th August, 1917. The following information has been supplied by Mr. P. C. Smith, Housing and Town Planning Engineer :—

The housing programme decided on by the Committee included 5,022 houses, 66 per cent. of which are to be of three apartments, 28 per cent. of four apartments, and the remaining 6 per cent. of five apartments, and these were to be erected on 52 different sites throughout the district. By the end of the year tenders had been accepted for 2,878 houses on 26 sites, equal to 57 per cent. of the whole scheme, and 670 houses or thereby were in actual course of construction. It is anticipated that fully 100 houses will be ready for occupation by May, 1921.

The following table gives particulars of the work for which tenders as above have been accepted:—

Parish and District.	Name of Site.	No. OF HOUSES.	
		Authorised.	In Progress.
<i>Avondale</i> —	Strathaven,	98	32
<i>Blantyre</i> —			
Stonefield, - - -	Auchinraith,	270	20
<i>Bothwell</i> —			
Bothwell, - - -	Bothwell Road,	122	66
Uddingston, - - -	Viewpark,	200	94
Tannochside, - - -	Tannochside,	40	12
Bellshill, - - -	North Road,	40	40
Do., - - -	Gas Works,	176	—
Do., - - -	Calder Road West,	210	48
Do., - - -	Calder Road East,	56	42
Chapelhall, - - -	Chapelhall,	50	30
Newarthill, - - -	Whittagreen,	100	—
Carnbroe, - - -	Carnbroe,	26	(Just commenced)
<i>Cambuslang</i> —			
Cambuslang, - - -	Croft Road,	112	38
	Wellshot,	88	24
	Lightburn,	190	26
<i>Cambusnethan</i> —			
Newmains, - - -	Tollpark,	90	38
Overtown & Waterloo,	Wemysshill,	114	(Just commenced)
<i>Dalserf</i> —			
Larkhall, - - -	Harleeshill,	134	(Just commenced)
	Hamilton Road,	116	32
<i>East Kilbride</i> —			
East Kilbride, - - -	Kirktonholm,	86	—
<i>Hamilton</i> —			
Quarter and Meikle			
Earnock, - - -	Meikle Earnock,	50	40
<i>Old Monkland</i> —			
Calderbank, - - -	Calderbank,	148	(Just commenced)
Baillieston, - - -	Rhindsmuir,	200	48
<i>Shotts</i> —			
Cleland, - - -	Cleland,	50	28
Salsburgh, - - -	Salsburgh,	52	(Just commenced)
<i>Stonehouse</i> —			
Stonehouse, - - -	Stonehouse,	60	12
Total Houses Authorised, - -		2,878	

Tenders for 4 additional sites, comprising 508 houses, are under consideration by the Board of Health, while plans and schedules for fully another 1,000 were in preparation. During the year under review progress was retarded on practically every site through a shortage of building materials—particularly bricks—while on the more advanced sites the lack of sufficient plasterers added to the delay.

During the period of the war also, when the demand for munitions had increased to such a great extent, housing accommodation had to be provided for workers concentrated in the neighbourhood of the munitions works. Thus no fewer than 500 houses were erected within the Middle Ward District at the instance of the Ministry of Munitions, in 150 of which building operations had actually been commenced by the District Committee. The following statement shows the Parish and District where these houses were erected, and also the amount of the accommodation provided:—

#### HOUSES ERECTED BY THE MINISTRY OF MUNITIONS.

Parish and District.	SIZE OF HOUSES.			Total.
	2 Apartments.	3 Apartments.	4 Apartments.	
<i>Bothwell—</i>				
Bellshill, -	16	56	28	100
Mossend, -	—	106	20	126
New Stevenston,	—	52	22	74
<i>Cambuslang—</i>				
Wellshot, -	—	140	10	150
<i>Old Monkland—</i>				
Carmyle, -	—	42	8	50
Total, -	16	396	88	500

**Town Planning.**—Previous to the passing of the Housing, Town Planning, &c. (Scotland) Act, 1919, it was necessary for the Local Authority to obtain the authority of the Board to prepare or to adopt a town-planning scheme, but Section 34 of that Act gave power to Local Authorities, *inter alia*, “to prepare a town-planning scheme with reference to any land within or in the neighbourhood of their district.” During the period of the war, and since, the staff of the Town Planning Department have been fully occupied with the various post-war housing schemes, and consequently little or no headway has been made in connection with the preparation of town-

planning schemes. The position in the District at the moment is as follows :—

Town-planning schemes were prepared, embracing 887 acres in Cambuslang District, 996 acres in Shotts District, 5,616 acres in Newton, Carmyle, Baillieston, &c., and 362 acres in the Hamilton Road District, in the Parish of Dalziel. With regard to the last-named scheme, 57 acres were originally within the area of the Burgh of Motherwell, as stated in the Annual Report for the year 1913, but, in consequence of the extension in November last of the boundaries of the Burgh of Motherwell and Wishaw, a further area of approximately 45 acres was absorbed by the Burgh. Additional town-planning areas to embrace certain land in the proximity of the Burgh of Coatbridge, in the Parish of Old Monkland, and in Strathaven, were contemplated, but, so far, no progress has been made with the preparation of schemes.

#### **Special Districts.**

The number of special districts within the Middle Ward at the close of the year was as follows :—

Special Drainage Districts,	...	...	...	24
Special Scavenging Districts,	...	...	...	19

These are referred to in detail in the report of the District Sanitary Inspector.

The question of the formation of the Middle Ward District into one Special District for the purposes of drainage, lighting, and scavenging was again before the Committee, and the matter is still under consideration.

#### **Water Supply.**

**PUBLIC SUPPLIES.**—During the year complaints were received as to the inadequacy of the supply of domestic water to various properties in Bothwell Parish. The complainants averred that the shortage was due to insufficient pressure, while the Water Engineer's staff reported to the effect that the owners' fittings were at fault. The supply has since improved. Complaints were also intimated, both with reference to the inadequacy and the quality of the water supply to properties in the village of Glenboig, where the Airdrie, Coatbridge, and District Water Trust is concerned. Representations made to the Trust's Engineer from time to time resulted in a temporary increase of supply, although here again it was alleged that the private fittings were responsible for the inadequacy. The quality of the water has also improved.



PRIVATE SUPPLIES.—No samples of water from private supplies were taken for analysis during the year.

### **Drainage and Sewage Disposal.**

At the close of the year there were 24 Special Drainage Districts in the Middle Ward District, being the same number as in the previous year. The work done in these districts, as well as in the areas where no Special District has yet been formed, is reported on in detail in the Sanitary Inspector's portion of this report, as well as in the County Report, in the section dealing with Rivers Pollution Prevention.

### **Dairies.**

During the year only one set of plans was lodged in connection with the occupation of new dairy premises. The plans were examined by the Sanitary Inspector, and after being made to conform to the provisions of the Dairies, Cowsheds, and Milkshops Order, 1885, reported to the Committee for approval.

DAIRY REGULATIONS.—The proposed new Regulations under the Dairies, Cowsheds, and Milkshops Order, 1885, referred to in the Annual Report for the year 1913, have not yet been confirmed.

The Milk and Dairies (Scotland) Act, 1914, which consolidated certain existing provisions, and sought to initiate a greater measure of control over disease in milk cows, and over insanitary conditions generally, was duly placed on the Statute Book, but, in view of the circumstances arising out of the war, the coming into operation of the Act was, and still is, postponed. This question is dealt with fully in the County Report.

### **Veterinary Inspection of Dairy Herds.**

The veterinary inspection of dairy herds was carried out by the County Veterinary Officer and an assistant.

The records show that 879 dairy herds, containing 17,328 cows, were examined. As on former occasions, samples of milk were drawn from all udders which, upon examination, showed conditions suspicious of tubercle. In this way 95 samples of milk were taken, and sent to the bacteriological laboratory, where, after examination, 16 were found to contain tubercle bacilli.

In all positive cases certificates were granted by the Veterinary Surgeon, in terms of Article 3 of the Dairies, Cowsheds, and Milkshops Order, 1899.

Cows with abnormal conditions of the udder other than tubercle were also recorded, and the results are as shown in the following table :—

INSPECTION OF DAIRY HERDS, 1920-21, CLASSIFIED ACCORDING TO PARISH.

PARISH.	Herds.	Cows.	Suspected Tubercle.						Cows with Abnormal Conditions of Udder.					
			Samples of Milk.	Result.				Tubercle.	Atrophy.	Mammitis.	Induration N.T.	Eruption on Teats.	Total.	
				Smear.		Biological.								
				+	-	+	-							
Avondale, - -	141	3,456	9	...	9	1	8	1	75	14	16	2	108	
East Kilbride, -	119	3,020	22	1	21	1	20	2	171	31	42	28	274	
Glasford, - -	57	1,192	5	2	3	1	2	3	31	10	6	8	58	
Stonehouse, -	45	913	6	1	5	...	5	1	13	4	5	...	23	
<i>First Division, -</i>	<i>362</i>	<i>8,581</i>	<i>42</i>	<i>4</i>	<i>38</i>	<i>3</i>	<i>35</i>	<i>7</i>	<i>290</i>	<i>59</i>	<i>69</i>	<i>38</i>	<i>463</i>	
Blantyre, - -	23	377	3	...	3	...	3	...	18	1	3	10	32	
Bothwell, - -	82	1,241	7	...	7	...	7	...	65	9	10	14	98	
Cambuslang, -	34	626	3	...	3	1	2	1	35	10	5	11	62	
Cambusnethan, -	66	1,222	10	4	6	...	6	4	44	7	10	3	68	
Dalserf, - -	32	518	1	...	1	...	1	...	15	5	3	2	25	
Dalziel, - -	10	308	9	...	9	...	9	...	18	6	3	4	31	
Hamilton, - -	54	1,099	9	...	9	1	8	1	32	3	8	15	59	
<i>Second Division, -</i>	<i>301</i>	<i>5,391</i>	<i>42</i>	<i>4</i>	<i>38</i>	<i>2</i>	<i>36</i>	<i>6</i>	<i>227</i>	<i>41</i>	<i>42</i>	<i>59</i>	<i>375</i>	
New Monkland, -	104	1,419	4	2	2	...	2	2	15	2	3	3	25	
Old Monkland, -	42	864	2	...	2	...	2	...	41	7	11	12	71	
Shotts, - -	70	1,073	5	1	4	...	4	1	22	1	3	4	31	
<i>Third Division, -</i>	<i>216</i>	<i>3,356</i>	<i>11</i>	<i>3</i>	<i>8</i>	<i>...</i>	<i>8</i>	<i>3</i>	<i>78</i>	<i>10</i>	<i>17</i>	<i>19</i>	<i>127</i>	
<i>Middle Ward, -</i>	<i>879</i>	<i>17,328</i>	<i>95</i>	<i>11</i>	<i>84</i>	<i>5</i>	<i>79</i>	<i>16</i>	<i>595</i>	<i>110</i>	<i>128</i>	<i>116</i>	<i>965</i>	

When the smear proved positive, no biological examination was done.

The total figures for abnormal conditions of udder include 79 cases of suspected tubercle, which gave negative results, and are therefore classified as induration.

These abnormal conditions and the number of cows affected were as follows:—Atrophy, 595; mammitis, 110; induration, N.T., 128; and eruption on teats, 116—total, 949. Adding to these figures the 16 affected with tubercle, the number of cows presenting abnormal conditions of the udder was 965 or 5·5 per cent.

### STAFFING ARRANGEMENTS.

Mr. James Dobson, who has held the post of District Sanitary Inspector since the year 1890, being in declining health, the Committee in the month of May considered it desirable to relieve him of the more responsible part of the executive duties, and asked him to continue in a consultative capacity at his present remuneration. Mr. John Millar, who has been on the Public Health Staff for over 20 years, engaged chiefly on indoor duty, and who, during the war, undertook the more responsible part of Mr. Dobson's outdoor duties, was unanimously appointed to the position of Chief Sanitary Inspector for the Middle Ward District.

The assistant sanitary inspectors, 9 in number, are now relieved of all duties relating to infectious disease except in cases of emergency. Early in the year 1915, owing to the departure of some of the assistant inspectors on military service, it was found desirable to employ nurses who had been fully trained and certificated in fever hospital work to undertake the duties of investigating outbreaks of infectious disease. At first only one nurse was so employed, but as the male staff became further depleted through the demands made by the military authorities for the services of the country's available manhood the number of nurses employed on outdoor work was gradually augmented. Furthermore, during the year 1919 the list of compulsorily notifiable diseases was added to considerably, and during the year 1920 a further addition was made, thus adding considerably to the work. By the end of the year under review no fewer than 14 nurses were employed. The result of this innovation in the staffing arrangements has been satisfactory.

When the small isolation hospital at Dalserf was utilised during the year for the reception and treatment of smallpox, the hospital was staffed by the nurse inspectors in relays.

8 of the nurses are on indoor terms, and are located as follows:—County Hospital, High Blantyre, 3; County Hospital, Dalserf, 2; and Nurses' Home, New Stevenston, 3. The remaining nurses are on outdoor terms.

# Report of the Sanitary Inspector.

## HOUSING.

HOUSING.—The administrative procedure under the Housing Acts is indicated in the information supplied to the Scottish Board of Health, in terms of Article 5 of the Board's Regulations for the purpose of Section 17 (1) of the Housing, Town Planning, &c., Act, 1909, which is given in the following tabular statement and subsequent paragraphs:—

Number of dwelling-houses inspected, ... ..	1,484
Number of houses found unfit for human habitation, ... ..	61
Representations to Local Authority, ... ..	None.
Closing Orders made, ... ..	None.
Defects remedied without making Closing Orders, ... ..	348
Defects remedied after making Closing Orders, ... ..	None.

TEMPORARY HOUSING.—The District Committee, on 30th January, 1920, after consideration of a memorandum, prepared by the District Clerk, on the subject of the provision of temporary housing accommodation, agreed not to take any steps with regard to the provision of temporary housing accommodation in the Middle Ward District in the meantime.

REPAIR OF HOUSES BY LOCAL AUTHORITY.—Difficulties having arisen with regard to the removal of insanitary conditions existing at certain properties, a sub-committee was appointed to report on the whole question of the powers of the District Committee with regard to the repair of houses, and particularly on the question of the District Committee executing repairs themselves, and recovering the expenses thereby incurred from the owner.

INSANITARY PROPERTIES.—On 20th April, the Medical Officer submitted a note regarding a number of insanitary properties throughout the district at which it was desirable that some improvements should be carried out, and suggesting that the District Committee should give a general indication to the Public Health Department as to how far they would be prepared to depart from the pre-war standard of sanitary requirements to meet the altered circumstances, on the distinct understanding that the properties dealt with might be occupied for a period of not more than ten years. A note on the



subject was afterwards issued by the District Clerk, and the Committee agreed that the Medical Officer of Health and the Clerk be given discretionary powers to negotiate with owners on the lines indicated, but on the distinct understanding that, where normal requirements were relaxed, the improvements accepted were only of a temporary nature, and were not to prejudice the Committee in calling for further improvements or the closing of houses at a later date.

*Marion, &c., Streets, Mossend.*—A communication was received from Messrs. William Beardmore & Co., Ltd., intimating their intention to demolish fifty-one old dwellings owned by them in Marion Street, Watt Street, Centre Street, and Pitt Street, Mossend, to permit of an extension of their works. The attention of the firm was called to the provisions of Section 6 of the Housing (Additional Powers) Act, 1919, and a representative of the firm afterwards had a meeting with the Housing Committee, who, after considering the whole circumstances, agreed that they could not grant permission for the taking down of the houses in question, but that, if the firm were prepared to build new houses to accommodate the tenants who would be dispossessed after the existing houses were demolished, the Committee would be prepared to reconsider the matter.

### **Insanitary Dwellings.**

Inspections were made during the year with a view to improved housing conditions, and many meetings were held with owners of property. Difficulties were experienced in arranging for improvements on account of the high cost and shortage of materials and labour, but, in spite of these, a considerable amount of work was successfully carried out during the year. The properties dealt with are briefly referred to as under :—

*Craig Row, Auchentibber.*—12 one-apartment dwellings—leaking roofs, damp walls, general dilapidation, and want of proper domestic and sanitary conveniences. Endeavours were made to arrange that the dwellings would meantime be rendered wind and water tight, but the owner was unable to execute any repairs on the property as she had no funds. The property afterwards changed hands, and the new owner has since carried out some repairs on the roofs.

*Craighead Rows, Blantyre.*—106 two-apartment dwellings. The question of the introduction of inside sinks and water supply to these dwellings was discussed with the Company, and the matter was still under consideration at the close of the year.



*Dixon's Rows, Blantyre.*—141 one-apartment and 134 two-apartment dwellings. The Company were asked to introduce inside sinks and water supply to these dwellings, and, after an interval of about nine months, intimated that they could not see their way to undertake the necessary work at the present time. The matter was reported to the Committee, who gave instructions for the service of notices under Section 246 of the Burgh Police (Scotland) Act, 1892. These notices were duly served just at the close of the year.

*Merry's Rows, Blantyre.*—36 one-apartment and 41 two-apartment dwellings. After negotiations, the Company agreed to provide inside sinks and water supply at these dwellings, and the work has since been completed.

*Priestfield Terrace, High Blantyre.*—11 two-apartment, 2 three-apartment, and 1 four-apartment dwellings—dampness of back and gable walls and want of proper domestic and sanitary conveniences. These matters have been under negotiation with the Colliery Company.

*Blantyre Village.*—The insanitary conditions existing in this village, referred to on page 234 of the Medical Officer's Report for 1913, were the subject of frequent inspection and complaint since that time. In 1914 a Colliery Company acquired the minerals under these lands and became the owners of the property on the surface. The Company were unwilling to continue the ownership of insanitary house property, and, after the acquisition, they instructed an architect to report, with an estimate of the cost of putting the property into a sanitary condition. The cost of reconstructing the dwellings on modern lines was found to be very great, and the Company decided upon a demolition scheme, all the houses to be emptied gradually, and demolished within the next eight years thus:—Cross Row, containing 44 dwellings to be demolished within the next year (1915); Shuttle Row, 12 dwellings to be demolished in 3 years and 21 in 5 years; Newlands Row, 17 dwellings in 5 years; Middle Row, 8 dwellings in 5 years and 13 dwellings in 8 years; Mill House, 3 dwellings in 8 years; Mayberry Row, 8 dwellings in 8 years; and Waterloo Row, 31 dwellings in 8 years. Meantime such improvements would be carried out as were necessary to keep the houses in a reasonable state of repair. The Company afterwards warned out some of their tenants in order to proceed with the scheme, but it was found that no other house accommodation was available, and the matter was therefore left in abeyance. In the beginning of 1920 the Colliery Company asked for permission to proceed with their demolition

scheme, and, after some negotiations, finally offered to convey the whole dwellings to the Local Authority, charging only a ground rent. The whole question was remitted to a sub-committee with a view to arriving at a satisfactory solution.

*Addie's Square, Bellshill.*—The repairs and improvements necessary at the 23 one-apartment and 1 two-apartment dwellings known as Addie's Square, Bellshill, referred to on page 20 of the Annual Report for 1914, was again under discussion. The Company's representatives stated that a commencement had already been made to extract the coal from under the dwellings, which, in their opinion, were not worth the expenditure involved in repairs, and the provision of new conveniences, and that the Company were not prepared to do anything in the way of improvements, but would shut up the dwellings as the tenants vacated them. With regard to the 4 two-apartment dwellings abutting on the Edinburgh Highway, the Company agreed to proceed with the provision of an inside sink, with water supply, a water-closet, and a coal cellar for each dwelling, and a new wash-house.

*Carnbroe.*—The introduction of improved domestic and sanitary conveniences for the workmen's dwellings at Carnbroe Iron Works, referred to on page 218 of the Medical Officer's report for 1911, was the subject of meetings with the Company's representative, and it was finally arranged that the Company would proceed with the improvements desired, the work to commence at the lowest point, and plans were afterwards approved for the erection of a scullery, fitted with sink and water supply and a water-closet, for each of the 20 two-apartment dwellings known as Long Row. The work is now in progress.

*New Orbiston Rows, Bellshill.*—The necessity for the introduction of proper domestic and sanitary conveniences to the 74 two-apartment and 1 three-apartment dwellings known as New Orbiston Rows, Bellshill, which had been delayed owing to the want of proper sewage facilities, was again brought before the Company, adequate drainage being now available. After negotiations, the Company lodged a plan showing the provision of (a) sculleries for 63 of the houses; (b) sinks in window recesses for the remaining 12 houses; and (c) water-closet accommodation as follows:—3 houses to have a closet each, 58 houses to have a closet in the proportion of one for every two houses, 6 houses to have one closet for every three houses, and 8 houses to have a closet for every four houses.

The Committee were prepared to accept these proposals, subject to some slight adjustment, and this decision was intimated to the Company, who, however, then declined to proceed with the work on account of the war. The whole circumstances were reported to the Local Government Board, but the question was allowed to drift until the end of 1918, when it was again taken up with the Company, and, after protracted negotiations, they agreed, in June, 1920, to deal with 16 of the dwellings fronting Hamilton Road, converting the front kitchen apartments of the houses into bedrooms and the existing rooms into kitchens, and providing a scullery at the rear of each dwelling, fitted with a sink and water supply, and a water-closet. The work is in progress.

*Hamilton Palace Colliery.*—The question of providing modern sanitary conveniences for these dwellings, referred to on page 234 of the Medical Officer of Health's report for 1913, was the subject of protracted negotiations with the Colliery Company, owing to the difficulties connected with sewage disposal. Plans were ultimately submitted and approved by the Committee in 1915, dealing with 407 houses and showing the erection of water-closets in the proportion of one for every two dwellings, together with the necessary drainage and arrangements for the treatment of the sewage before discharging same into the river Clyde. Progress was, however, delayed on account of the war, but, during the current year, the work has been commenced at a block of 27 houses known as Avon Place.

*Parkhead Rows, Bellshill.*—114 two-apartment dwellings. The necessity for improved domestic and sanitary conveniences at these rows was brought before the Company in 1915. After much correspondence and many meetings, the Company, in 1919, agreed to proceed with the erection of a scullery for each house, fitted with sink, water supply, and water-closet, and to proceed immediately with the erection of 24 of these sculleries in front of the houses facing Hamilton Road. These 24 have now been completed, and the Company have been asked to proceed with the remainder.

*Douglas Park Square.*—18 one-apartment and 44 two-apartment dwellings belonging to the same Company as Parkhead Rows. No arrangements have yet been made for the introduction of improved domestic and sanitary conveniences.

*Douglas Park Rows.*—1 one-apartment and 10 two-apartment dwellings. Improved domestic and sanitary conveniences for these dwellings have been requested.

*Old Orbiston Rows.*—Serious insanitary conditions were found to exist at the 16 one-apartment back-to-back dwellings and the 16 two-apartment dwellings known as Old Orbiston Rows, near Bellshill, due to the want of proper domestic and sanitary conveniences and lack of repair. The question was raised with the Colliery Company, and negotiations were proceeding at the close of the year.

*Young's Land, Thorniewood.*—3 one-apartment, 18 two-apartment, and 2 three-apartment dwellings. The existing sanitary conveniences were two privy-middens, and the water supply was obtained from two outside stand wells. The owner agreed to carry out certain improvements, including the provision of an inside sink and water supply for each dwelling, with a water-closet for every two dwellings. The work is in progress.

*Bothwell Park Rows.*—2 one-apartment, 157 two-apartment, 2 three-apartment, and 1 five-apartment dwellings. The question of improved domestic and sanitary conveniences for these dwellings was discussed with the Colliery Company, who afterwards decided to proceed with an improvement scheme, provided a suitable drainage outlet could be obtained. Plans were submitted and approved by the Committee—dealing in the first instance with 53 dwellings in the East Row—showing the erection of sculleries, with inside sinks, water supply, and a water-closet for each dwelling, with outside blocks, containing a wash-house for every four dwellings and a coal cellar for each dwelling. Estimates were obtained, but the cost was found prohibitive, and a modified scheme is now under consideration.

*Calderbraes, Uddingston.*—13 two-apartment dwellings. The question of improved sanitary conveniences for these dwellings has been raised with the owners, and is under consideration.

*24-26 Hamilton Road, Bellshill.*—This property comprises a two-storey building fronting Hamilton Road, containing 3 two-apartment dwellings and a shop; a single-storey back land, containing 1 one-apartment dwelling; and a two-storey back land, containing 4 one-apartment dwellings. These dwellings all present serious sanitary defects, including damp walls, defective roofs, broken floors, broken plaster, &c., and were the subject of applications by the tenants for certificates under the Rent Restriction Act. The premises are not in a condition reasonably fit for human habitation, but the owners refuse to do anything, on the ground that the property was acquired for demolition purposes to permit of the erection of a picture house. The case was reported to the Committee, who instructed that action



should be taken against the owners under the Public Health Act. The law agents advised that procedure be taken under the Housing Acts, and the case is still pending.

161-167 *Hamilton Road, Bellshill*.—4 two-apartment dwellings. The owners were asked to have the existing foul privy-midden abolished and water-closet accommodation provided. As no progress was made, notices were served under Section 246 of the Burgh Police (Scotland) Act, 1892.

*Tannochside*. — *Hozier Street*—94 two-apartment dwellings; *Laidlaw Street*—82 two-apartment dwellings; and *Russell Place*—29 two-apartment dwellings. The introduction of modern domestic and sanitary conveniences to these dwellings was discussed with the Colliery Company. Some difficulty has arisen with regard to sewage outfall, owing to the existing drains at the property having been affected by underground workings, and matters are still in negotiation.

*Westburn Rows, Cambuslang*.—84 one-apartment and 2 two-apartment dwellings. The owner has been asked to provide improved sanitary conveniences.

*Barrie's Stables, Newmains*.—The negotiations for the alterations and improvements considered necessary at these dwellings—referred to on page 22, of the Annual Report for 1914—were resumed, and a plan showing the Company's proposals was afterwards submitted to the Committee. The premises comprise 10 single-apartment back-to-back dwellings, and the plan showed the provision of annexes on the south side of the building, containing five sculleries, each with sink and water supply, three water-closets entering from the outside, and two wash-houses. It was reported that there was such a demand for housing accommodation in the neighbourhood that it was not possible at present to take steps in the direction of the conversion of the one-apartment dwellings into two-apartment houses, but that whenever it was possible to do so these alterations to the property would be carried out, and the owners would then be requested to provide a water-closet for each house. The Committee approved of the proposals as a tentative arrangement.

*Clydesdale Rows, Wishaw*.—This property comprises 3 one-apartment, 41 two-apartment, and 3 four-apartment dwellings, and it was found that water was running through most of the roofs, many of the walls showed much dampness, the pail privies were in



a most insanitary condition, and the roadway between the Rows was covered with mire and water. Notices were served under Section 16 of the Public Health Act for the removal of the nuisance conditions, and a notice was also served under Section 246 of the Burgh Police (Scotland) Act, 1892, requiring the provision of a water supply and water-closet for each dwelling. The Factor intimated that he was willing to continue to maintain the roofs in repair and keep the premises clean, but he would do nothing more, as it had already been decided to demolish the houses whenever an opportunity is afforded of doing so.

*Springhill Buildings, Stane Place, and Manse Road.*—Referred to on page 13 of last Annual Report. No progress has been made in the negotiations for the introduction of modern sanitary conveniences.

*Ashgillhead Rows.*—The want of proper domestic and sanitary conveniences at the two Rows of single-storey brick-built dwellings, comprising 19 one-apartment and 13 two-apartment dwellings, known as Ashgillhead Rows, in the Parish of Dalserf, was in negotiation at the close of the year.

*Meadowhill Rows.*—This property comprises 92 one-apartment and 29 two-apartment brick-built dwellings, mostly back to back. Trough water-closets were introduced in 1903 at the request of this department in the proportion of one closet for every four families. These closets are situated at some distance from the dwellings, and were usually in a filthy condition. The houses fronting the highway have a slop sink, without water supply, between every two houses, placed close to the front walls. These sinks are continually choking. The back dwellings have surface channels, which were in a foul and dilapidated condition. The water supply is obtained from four outside stand wells. The dwellings themselves present numerous sanitary defects, being back to back, without through ventilation, windows unprovided with means of opening, roofs defective and leaking, floors broken, plaster dilapidated, insufficient wash-house accommodation, and want of coal cellars. The matter was discussed with the owner in the beginning of 1915, and he arranged to proceed with the conversion of the single-apartment back-to-back dwellings into houses of two apartments, each provided with a scullery fitted with sink and water supply, and a water-closet. The erection of the sculleries was, however, afterwards abandoned on the ground of expense, and an alternative proposal was put forward to convert the

dwelling into through houses of two apartments, and to provide each with a sink and water supply in the kitchen window, with a water-closet between every two houses. Two blocks of dwellings, 16 in all, were thus dealt with, but the work was stopped owing to the war. The owner having died, the matter was taken up with his successor in the beginning of 1920, who intimated that he had no desire to spend money on the property, and asked that a Closing Order might be made. The whole circumstances having been considered by the Committee, instructions were given for the service of notices under Section 246 of the Burgh Police (Scotland) Act, 1892, requiring the introduction of sinks with water supply and a water-closet for each dwelling. Before service of the notice the property was sold, and the new owner was thereupon asked to put forward a suitable improvement scheme. This not being forthcoming, notices under Section 246 of the Burgh Police (Scotland) Act, 1892, were served on him, and in the interval proceedings were successfully taken under Section 16 of the Public Health Act for the broken and defective rhones and water channels and foul surroundings.

*Low Shawsburn.*—10 two-apartment dwellings. The provision of improved domestic and sanitary conveniences has been discussed with the owners, but no decision has yet been arrived at.

*Bog Rows, Larkhall.*—18 two-apartment dwellings. The provision of improved sanitary conveniences was taken up with the Colliery Company, and plans were afterwards approved for the erection of a scullery, fitted with sink and water supply, and a water-closet for each dwelling. The work has been commenced.

*North Street, Larkhall.*—6 one-apartment dwellings, with sculleries, inside sinks, and water supply. Complaint was made as to serious nuisance conditions arising from two foul and dilapidated privy-middens at this property. A water-closet has now been provided in each scullery, and the privy-middens will be removed.

*Udston Rows.*—This property was referred to on page 220 of the Medical Officer's Report for 1911, and has been the subject of correspondence during the intervening years. Early in 1920, it was found that the insanitary conditions existing were such as to call for action being taken, and, on the question being raised, the Company replied that they expected the working of the colliery to be stopped at an early date, and did not think expenditure on repairs would be warranted. The property was subsequently sold, and a communication was received from the new owners' agents inquiring whether, in view

of the wide powers of the District Committee under the Housing Acts for the reconstruction of property, the District Committee were willing to entertain a proposal for the sale of the property to them, and indicating that the property might be transferred on a reasonable basis. The Committee, before coming to any decision in the matter, agreed that an architect should be engaged to consider whether a suitable conversion of the property could be made at a reasonable expenditure, and, if so, to submit a detailed plan of his proposals.

*Meikle Drumgray*.—20 two-apartment dwellings. The owners have been asked to provide improved domestic and sanitary conveniences.

46 A-G *Crosshill, Baillieston*.—5 one-apartment and 2 two-apartment dwellings, numbered 46 A-G Crosshill, Baillieston. Plans were approved for the introduction of a sink and water supply in the kitchen window of each dwelling, three new water-closets, and two new coal cellars.

*M'Gee's Land, Baillieston*.—The old properties, comprising three shops and two dwelling-houses situated at 53-59 Main Street, and 12 one-apartment and 4 two-apartment dwellings situated at 16-36 Buchanan Street, Baillieston, have been the subject of much correspondence with regard to the introduction of water-closets, the only conveniences being filthy privy-middens, and the water supply obtained from outside stand wells, the waste water being thrown into a surface channel on the public highway. Notices were ultimately served under Section 246 of the Burgh Police (Scotland) Act, 1892. The owner afterwards submitted a plan for the erection of 4 water-closets for the 16 dwellings at Buchanan Street, and 1 water-closet for the 3 shops and 2 dwelling-houses in Main Street, but the Committee adhered to their decision that the provision of a water-closet for each dwelling was necessary, and that the owner's proposals could only be accepted as an instalment of the completed scheme.

1-7 *Glasgow Road, Barrachnie*.—5 two-apartment and 1 three-apartment dwellings. Dilapidated brick work requiring re-pointing, roofs leaking, plaster defective, floors defective, and back wall embedded. The owner was asked to have such measures taken as would render the dwellings reasonably fit for habitation, and the work has now been carried out.

47-53 *Causewayside Street, Tollcross*.—5 one-apartment, 5 two-apartment, and 1 three-apartment dwellings were found to be without

sanitary conveniences. In view of the probable early demolition of the buildings two new ash-closets were accepted as a temporary remedy, and these have been found satisfactory.

*Crosshill Square, Baillieston.*—11 one-apartment and 11 two-apartment dwellings. After negotiation, the owner agreed to provide water-closets in the proportion of one closet for every two dwellings, two new wash-houses, and divide the existing wash-house into two. These improvements have now been completed.

*Reid's Row, Baillieston.*—Plans were approved for improvements at the 27 one-apartment dwellings known as Reid's Row, providing a scullery, fitted with sink, water supply, washing-boiler, water-closet, and coal cellar for each dwelling. The work has since been completed.

*Beech Row, Kirkwood.*—6 two-apartment dwellings in a dilapidated condition, felt-covered roofs rotten and leaking, walls damp, and want of proper domestic and sanitary conveniences. The premises in their existing condition were quite unfit for human habitation. The owner's agents stated that she was not in a position to carry out repairs, and the question was accordingly brought before the Housing Committee, who instructed that proceedings be taken to have the repairs necessary to put the houses into a habitable condition carried out. The property changed hands, and the new owner has since made the roofs watertight. He has, however, intimated that he now wishes to close the dwellings, and the matter is still under consideration.

*Boghall Square, Broomhouse.*—30 one-apartment and 16 two-apartment dwellings were found to be quite uninhabitable on account of damage done by mineral workings. The condition of the privy-midden which serves this square was also complained of. After pressure, the Company had certain repairs carried out on the dwellings, but the matter of improved sanitary conveniences has not yet been adjusted.

*Calderbank.*—Old Square, 20 one-apartment, 57 two-apartment, and 3 three-apartment dwellings; New Square, 6 one-apartment, 55 two-apartment, and 2 three-apartment dwellings. The matter of improved sanitary conveniences has been discussed with the owners, but no arrangement has yet been come to.

*Baillieston.*—The question of improved sanitary conveniences for the following properties in Baillieston has been taken up with the



parties interested :—12-26 Crosshill; 29-33 Crosshill; 35-39 Crosshill; 1-11 Gillies Lane; 22-28 Gillies Lane; Muirside; Burnside; 37-43 Rhindsmuir Road; 1-13 Rhindsmuir Road; Bogside Place, Easterhouse; 224-234 Easterhouse Road; 2-12 Rhindsmuir Road; 15-16 Long Row, Swinton; 40-48 Easterhouse Road; and Steel's Property, Swinton.

*Morningside Place, &c., Shotts.*—The question of insanitary conditions existing at the dwellings owned by the Baton Colliery Company, situated at Dykehead, in the Parish of Shotts, raised in 1914, was revived. No satisfactory progress was made and, on the matter being reported to the Committee, authority was given for the service of notices under Section 246 of the Burgh Police (Scotland) Act, 1892. Plans were afterwards submitted by the Company showing their proposals as under :—

*Morningside Place.*—Two-storey buildings, comprising 30 two-apartment dwellings, which already have inside sinks with water supply, and which are now to be provided with 16 water-closets, built in towers, and close to the dwellings.

*Gray's Land.*—One-storey building, comprising 12 two-apartment dwellings, each dwelling to be provided with inside sink and water supply, and 6 outside water-closets built against the back wall.

*Garret Row.*—One-storey building and attics, comprising 12 one-apartment back-to-back dwellings and 6 attic one-apartment dwellings, to be provided with inside sinks and water supply and 8 outside water-closets.

*Youngson's Land.*—One-storey building, comprising 8 single-apartment dwellings, each dwelling to be provided with inside sink and water supply, 4 outside water-closets are also to be provided.

*Forrest's Land.*—Two-storey building, comprising 8 two-apartment dwellings, each dwelling to be provided with inside sink and water supply, 4 outside water-closets also to be provided. These proposals were approved and the work is to proceed.

*Shotts.*—In the matter of the introduction of modern conveniences for the dwellings owned by the Shotts Iron Company, Ltd., referred to on page 15 of last Annual Report, no further progress has been made.

*Victoria and Albert Streets, Harthill.*—120 two-apartment dwellings, with insanitary privy-middens, water supply from outside stand-pipes, and no wash-house accommodation. The property recently changed



hands, and the new owner insisted on reconstructing the dilapidated privy-middens, although asked to provide modern sanitary conveniences. The Committee gave instructions for the service of notices under Section 246 of the Burgh Police (Scotland) Act, 1892, requiring the introduction of inside sinks with water supply and water-closet accommodation. Proceedings were also successfully taken under Section 16 of the Public Health Act for the removal of nuisance conditions at the privy-middens.

*West Benhar.*—These dwellings, referred to on page 240 of the Medical Officer's Report for 1913, and in respect of which a Closing Order was made by the Sheriff, are still occupied. In view of the exceptional circumstances prevailing in the neighbourhood with regard to housing accommodation, it has been found expedient to make a joint-application from year to year to the Sheriff to extend the date fixed by him for the closing of the houses. The colliery firm, which at present lease the dwellings, were anxious to acquire them from their present owners, and to carry out certain improvements with a view to making the premises reasonably fit for habitation. The matter was remitted to a sub-committee.

*Hawthorn Place, Dykehead, Shotts.*—16 one-apartment back-to-back dwellings and 8 two-apartment dwellings. The 8 upstairs houses had water-closets on the stair landings in the proportion of one closet for every two dwellings, while the downstairs houses had six pail-closets. The walls of the latter were in a dilapidated condition. The drainage from the property discharged into a cesspool, the overflow from which passed into a ditch in a field adjoining and created a serious nuisance. The drainage has now been connected to the public sewer, and the pail-privies have been converted into water-closets.

*Gilburn Place, Shotts.*—24 two-apartment dwellings. Plans were approved for the introduction of a sink water supply and a water-closet to each of the existing sculleries, and also a new coal cellar for each dwelling. This work has been completed.

*Eastfield, Harthill.*—17 two-apartment dwellings. Plans were approved for the erection of a water-closet for each dwelling, but the work has not yet been commenced.

*Dandy Row, Cleland.*—The want of proper domestic and sanitary conveniences at the 7 one-apartment and 4 two-apartment dwellings known as Dandy Row, Cleland, was taken up with the owners, and no satisfactory progress having been made, notices were served under Section 246 of the Burgh Police (Scotland) Act, 1892.

**INCREASE OF RENT AND MORTGAGE INTEREST (RESTRICTIONS) ACT, 1920.**—From the time this Act came into operation till the end of the year no fewer than 1,103 applications for certificates were received. In every instance a careful inspection of the premises had to be made and a report submitted for the consideration of the Committee. The certificates granted by the Committee numbered 718, while 43 were refused, leaving 342 being dealt with at the close of the year.

### **Drainage.**

There are still 24 special drainage districts in the Middle Ward Area, no new districts having been formed during the year.

*Auchentibber.*—The want of proper drainage facilities for the village of Auchentibber, in the Parish of Blantyre, which was under the consideration of the Committee in November, 1915, was again taken up, and it was suggested that action might be taken under Section 103 of the Public Health Act. As a housing scheme was, however, now in contemplation for the village, further action was delayed meantime.

*Newarthill.*—The unsatisfactory drainage arrangements in this village were referred to on page 251 of the Medical Officer's Annual Report for 1913, and the District Engineer reported, in September, 1914, on a modified scheme, which was afterwards approved by the Committee, with the addition that arrangements might be made for irrigation works. Specifications were issued to contractors, but it was found impossible to proceed owing to the war. Nuisance conditions were complained of during the past year, and it was suggested that, as a temporary expedient, an arrangement might be come to, whereby the irrigation of the sewage might be satisfactorily carried out and the nuisance complained of removed. The Committee approved of the proposal, and a remit was made to arrange the best terms possible—the cost to be met out of the Public Health rate. The owner of the ground, however, stipulated for an annual payment of £20, with a weekly payment of 10s. for attending to the irrigation works, or, alternatively, to sell the field to the Committee. The Committee could not entertain these terms, and, although other negotiations have taken place, no satisfactory settlement has yet been arrived at.

*Salsburgh.*—The formation of a special scavenging district to include the village of Salsburgh was referred to on page 252 of the Medical Officer of Health's Report for 1913, but the execution of the

work was delayed owing to the outbreak of war. The matter was again under consideration during the past year, when a report was submitted by the District Engineer, dealing with a scheme for sewerage and sewage purification for the special drainage district, and the new houses proposed to be erected by the District Committee. It was decided to proceed meantime with the construction of the sewers necessary for the housing scheme, and a tank of half the capacity required for the whole of the drainage district, including the new houses when completed.

*Tannochside.*—In connection with the proposed introduction of modern sanitary conveniences at Tannochside, referred to on page 106 of this Report, it was found that, owing to the abstraction of minerals, the ground at the north end of the Rows had subsided, while the ground in the vicinity of the old Edinburgh Highway, which carries the main sewer, and is also a barrier between two coalfields, had remained stable. The whole matter was reported on by the District Engineer, who found that it would be necessary to lower the Committee's sewer, and that the alterations should be such that an outlet would still be provided, after the whole coal had been extracted from below the Rows. The report also dealt with the laying of a new sewer within the Rows. The Committee agreed to the reconstruction of the public sewer, as recommended by the Engineer, provided the Colliery Company agreed to proceed with the construction of the sewer necessary within their property at their own cost.

### Water Supply.

The water supply from the various reservoirs belonging to the Middle Ward District Committee was more than sufficient to meet all demands.

The following is a note, prepared by the Water Engineer, showing the extensions of water-pipes carried out in the Middle Ward District during the year :—

Thornton Farm, Thorntonhall,	-	-	-	-	520 yards.
Millbrae, Thorntonhall,	-	-	-	-	370 „
Burnside and East Kilbride Road,	-	-	-	-	200 „
Garrion Bridge,	-	-	-	-	120 „
Newton,	-	-	-	-	240 „
Bothwell Bridge to Bellshill,	-	-	-	-	4,300 „
Glebe Street, Bellshill,	-	-	-	-	400 „
Crossgates, Bellshill,	-	-	-	-	360 „
Auchentibber,	-	-	-	-	1,300 „
Wishaw Back Road,	-	-	-	-	2,000 „

*Connections to New Housing Schemes :—*

Cleland, - - - - -	1,300	„
Croft Road, Cambuslang, - - - - -	1,180	„
Lightburn, Cambuslang, - - - - -	2,200	„
Wellshot, Cambuslang, - - - - -	570	„
Hamilton Road, Larkhall, - - - - -	820	„
Hareleeshill, Larkhall, - - - - -	1,800	„
Strathaven, - - - - -	1,500	„
Meikle Earnock, - - - - -	1,190	„
North Road, Bellshill, - - - - -	280	„
Calder Road (West), Mossend, - - - - -	2,300	„

*Glenboig.*—The village of Glenboig is in the supply area of the Airdrie and Coatbridge District Water Trust, and in the beginning of the year complaints were made as to the unsatisfactory quality of the water being supplied in the village. Samples were taken, and it was found that the water was so very unsatisfactory that it could be certified as unfit for potable purposes. It was also found that the supply to certain parts of the village was intermittent. These matters were taken up with the Water Trust, and certain improvements have been effected.

*Private Supplies.*—No complaints were received during the year with regard to water supplies from private sources.

**Scavenging.**

There are now 19 special scavenging districts in the Middle Ward Area, a new district having been formed during the year to include the village of Newarthill, in the Parish of Bothwell.

*Baillieston.*—The daily collection and removal of refuse within this special district is carried out by a staff in the direct employment of the Local Authority, the dry refuse being deposited in a coup and the wet ashpit matter used for farm purposes.

**COMMON STAIRS, &c.**—Two notices, in terms of Section 117 of the Burgh Police (Scotland) Act, were served on proprietors, requiring them to whitewash or, at their option, to paint the walls and ceilings of the common passages and staircases at their property. The work necessary in each instance has been duly carried out.

*Bellshill.*—The daily collection and removal of refuse in this special district is under the direct control of the local Sub-Committee of Management, who have a superintendent and staff in their own employment, the refuse being disposed of at Bellshill Destructor.



COMMON STAIRS, &c.—Thirteen notices were served, requiring the whitewashing or painting of common passage and staircases. The work was duly carried out.

*Blantyre.*—From the formation of this special district in 1909 the daily collection and removal of refuse was carried out by contractors, but this method was found to be unsatisfactory. On 16th May, 1920, the work was taken over by the Sub-Committee of Management, and a staff of six men and three horses engaged, under the direct control of the Committee. A great improvement has been effected in the work of scavenging. The refuse is disposed of at Blantyre Destructor.

COMMON STAIRS, &c.—Forty-nine notices were served, requiring the whitewashing or painting of common passages and staircases, and in each instance the work was duly carried out. Notices were also served on six occupiers, in terms of Section 115 of the Burgh Police Act, determining the weekly rotation to be observed in sweeping and washing the common stairs and landings giving access to their dwellings, and intimating that, in the event of their failing to comply with these requirements, proceedings would be taken against them. Sweeping and washing have since received attention, and proceedings have, so far, been unnecessary.

*Bothwell.*—The daily collection and removal of refuse continues to be carried out by a staff employed within this special district in a satisfactory manner, the refuse being disposed of at Fallside Coup.

*Cambuslang.*—The daily removal of refuse in this area is carried out by a staff in the direct employment of the Committee, the refuse being disposed of at Cambuslang Destructor.

COMMON STAIRS, &c.—Four notices were served, requiring the whitewashing or painting of common passages and staircases. The work necessary in each instance has been duly carried out.

*Carmyle.*—The collection and removal of refuse in this special district continues to be done by the staff in a satisfactory manner. The refuse is partly disposed of on farm lands, and the remainder in coups.

*Cleland and Omoa.*—The refuse in this special district is removed by a contractor and disposed of on farm lands.

*Dalzell and Netherton.*—The work of scavenging in this special district continues to be done by the staff in a satisfactory manner, the



refuse being collected three times weekly, and deposited in coups. Part of the time of the staff is devoted to the special district known as Hamilton Road.

*East Kilbride.*—The work in this area is carried out by a contractor. The refuse is disposed of on farm lands or in a coup.

COMMON STAIRS, &c.—One notice was served, requiring the white-washing or painting of a common passage and staircase. The work was duly carried out.

*Gartlea.*—The refuse in this special district is collected once a week by the contractor, and deposited in a coup. The work is carried out satisfactorily.

*Hamilton Road.*—The removal of refuse in this special district is undertaken three times weekly by the staff employed by the Dalzell and Netherton District, and has been done satisfactorily.

*Holytown, &c.*—The daily collection and removal of refuse to New Stevenston Destructor has been carried out by the staff in a satisfactory manner. During the year the boundaries of the special district were extended to include the village of Legbrannock.

COMMON STAIRS, &c.—Three notices were served on occupiers determining the weekly rotation to be observed in sweeping and washing the common stairs and landings giving access to their premises. Sweeping and washing have since received attention, and proceedings have, so far, been unnecessary.

*Larkhall.*—The daily collection and removal of refuse from this area is undertaken by a staff in the direct employment of the Committee. As there are still a large number of privy-middens here, part of the refuse has to be disposed of on farm lands or coups, the remainder being dealt with at Larkhall refuse destructor. During the year the boundaries of the special district were extended to include Strutherhill.

COMMON STAIRS, &c.—One notice was served on an owner of property who had failed to whitewash or paint the walls and ceilings of a common passage and staircase. The necessary work was carried out.

*Newmains.*—The collection and removal of refuse in this special district is undertaken by a contractor, and the material disposed of on farm lands.

**COMMON STAIRS, &c.**—A notice was served on an occupier, determining the weekly rotation to be observed in sweeping and washing the common stairs and landing giving access to his premises. Sweeping and washing have since received attention, and proceedings have, so far, been unnecessary.

*Salsburgh.*—The weekly removal, by the contractor, of the refuse in this special district continues to be carried out satisfactorily.

*Shotts, &c.*—The removal of refuse in this special district is carried out by a staff in the direct employment of the Committee, the material being disposed of on farm lands and at two coups. The large number of privy-middens in this district renders the work extremely difficult, and pressure is still being exercised to have these receptacles abolished.

*Strathaven.*—The daily collection and removal of refuse in this special district is in the hands of a contractor, and the work has been carried out in a fairly satisfactory manner. The refuse is deposited in a coup.

*Uddingston.*—The daily collection and removal of refuse within this special district continues to be carried out satisfactorily by the contractor. The refuse is deposited in Fallside Coup.

**COMMON STAIRS, &c.**—Notices were served on 9 owners, requiring them to whitewash or to paint the walls and ceilings of the common passages and staircases at their property. The work necessary in each instance has been carried out.

*Chapelhall.*—A requisition having been received, signed by not fewer than 10 Parish electors, calling upon the District Committee to consider the propriety of forming the village of Chapelhall into a special scavenging district, a report was made on 10th May, 1920, giving details of the number of dwellings, water-closets, and privy-middens, and showing that a rate of 2s.  $1\frac{6}{12}d.$  per £ would be required to meet the annual expenditure. The matter was continued for further consideration.

*Stonehouse.*—A requisition having been received from Parish electors, calling upon the District Committee to consider the propriety of forming the village of Stonehouse into a special scavenging district, a detailed report, dated 3rd August, 1920, was submitted, showing that the rate required to meet the annual expenditure was about 1s. 7d. per £. Further consideration of the question was deferred meantime.

*Newarthill.*—A requisition having been received from the Parish Council of Bothwell calling upon the District Committee to consider the propriety of forming Newarthill into a special scavenging district, two reports were submitted for consideration. The first, dated 9th June, showed that the estimated cost of carrying out the work by administration would require a rate of about 3s. 7d. per £ for the first year, and for subsequent year 2s. 5d. per £. The second report, dated 22nd July, showed that to carry out the work by contract would require a rate of 1s. 2d. per £. The Committee agreed to recommend that a special scavenging district be formed, and that the work be undertaken by contract.

*Provision of Dustbins.*—In view of the attitude taken up by certain owners who declined to provide new dustbins for their properties, the District Committee, in terms of the Lanarkshire County Council (Water, &c.) Order Confirmation Act, 1917, passed a resolution on 29th August, 1919, adopting Sections 23 and 24 of the Burgh Police (Scotland) Act, 1892, within the various special scavenging districts in the Middle Ward Area, and no objections having been lodged, the resolution has been put into effect since the beginning of this year.

### Water-Closets.

The following statement shows the number of privies which existed in special scavenging districts prior to formation of same; also the number since abolished and water-closet accommodation provided:—

	Privies.	Abolished		Privies.	Abolished.
Baillieston, -	145	84	Holytown, -	155	152
Bellshill, -	382	326	Larkhall, -	845	777
Blantyre, -	251	250	Newmains, -	246	246
Bothwell, -	100	95	Salsburgh, -	56	—
Cambuslang, -	212	212	Shotts, -	717	112
Carmyle, -	50	25	Strathaven, -	460	460
Cleland, -	260	32	Uddingston, -	102	102
Dalzell, -	30	18			
East Kilbride, -	34	31		4,049	2,924
Gartlea, -	4	2			

### Private Streets.

A number of inspections of private streets were made during the year, and these will be briefly referred to:—

*Blantyre.*—The insanitary condition of School Lane was reported to the Committee, and action recommended under Section 39 of the Public Health (Scotland) Act, 1897. Notices were afterwards served

upon the respective owners fronting, adjoining, or abutting on the street, requiring them to put the street into a satisfactory condition.

*Shotts*.—Certain private streets in Shotts and Dykehead Special Scavenging District were under consideration, and the matter was continued for a report dealing with the condition of the streets in relation to the requirements of Section 39 of the Public Health Act and the steps which might be taken thereunder.

*East Kilbride*.—The insanitary condition of the private street leading to the gasworks was taken up with the owners interested, and a request was afterwards made that the street might be taken over as a highway. The matter was remitted to a sub-committee to meet with the feuars.

### NUISANCES.

During the year 70,644 inspections were made for the detection of nuisances, and the number of nuisances recorded was 4,363, the chief being choked drains, foul ashpits, and privies.

3,198 intimations were issued to authors of nuisances, and, in many instances, the cause of complaint was immediately removed. Where the intimations had received no attention, statutory notices were served, and these numbered 828.

Legal proceedings were taken in five instances, and in every case were successful. They might be briefly summarised thus:—

- |  |  |
|--|--|
| 1. Dyke Street, Baillieston, - - -                                     | Tenants failing to cleanse water-closet.   |
| 2. Victoria and Albert Streets, Harthill, - - -                        | Dilapidated and filthy privy-middens.  |
| 3. Chalmers Square, Ben Lomond View, and Main Street, Glenmavis, - - - | Choked drain traps, foul ashpits and privies, dilapidated privies, and foul backcourt. |
| 4. Canderdykehead Toll, Dalserf, - - -                                 | Leaking roofs and broken floors.   |
| 5. Chalmers Square, &c., - - -   | Action for recovery of penalties under Section 24, P.H. Act.                           |

*Unfenced Shafts*.—6 disused mine shafts were found to be in a dangerous condition, and dealt with by the department. These were situated as follows:—Espieside, Coatbridge; Monkland Bridge, Chapelhall; Fairybank, Newhouse; Cameron, Greengairs; Wester Dunsyston, Chapelhall; and Badallan, Fauldhouse.



### Workshops.

The number on the register at the beginning of the year was 486. Since then, 14 have been added thereto and 9 removed therefrom, leaving 491 at the close of the year. This number includes 64 retail bakehouses, one of which is considered underground.

In the course of the year, 8 notices were received from H.M. Inspector of Factories of persons beginning to occupy workshops. The premises were duly inspected, measured, and the occupiers supplied with cards showing the capacity of each room and the number of employees permissible. Particulars were taken as to how the walls and ceilings were treated, the means of light and ventilation, the number of persons employed, and the sanitary conveniences provided. The inspections made numbered 252, and 13 notices were received from the Inspector of Factories regarding insanitary conditions in workshops. The various matters complained of were taken up and dealt with by the Sanitary staff. These related to want of cleanliness, 10; want of ventilation, 1; and other defects, 2.

3 lists, containing 9 outworkers, under Section 107 of the Factory and Workshops Act, were received from the City of Glasgow, Greenock, and Wishaw Authorities. Inspections were made of all the premises, and these were found in a satisfactory condition.

The following table gives the handicrafts carried on in the various workshops :—

#### HANDICRAFTS.

Dressmaker, - - -	97	Watchmaker, - - -	7
Tailor, - - -	125	Plumber, - - -	10
Milliner, - - -	21	Tinsmith, - - -	1
Baker, - - -	64	Photographer, - - -	1
Shoemaker, - - -	59	Cycle Repairer, - - -	7
Saddler, - - -	9	Motor Repairer, - - -	3
Blacksmith, - - -	22	Hosier, - - -	8
Joiner, - - -	22	Coachbuilder, - - -	8
Cabinetmaker, - - -	6	Ragpicker, - - -	1
Silk Weaver, - - -	15	Confectioner, - - -	1
Laundry, - - -	4	Underclothing, - - -	2
Draper, - - -	1		

### Tents and Vans.

In the course of the year 144 inspections were made. The premises were found in a clean condition, and no overcrowding detected.



### **Interments.**

The bodies interred at the expense of the Local Authority in the course of the year numbered 13, the deaths being due to various causes. 6 of these bodies were unclaimed and 7 claimed, but no "sufficient persons" undertook the burial.

In every case where application is made to the Local Authority for the interment of a dead body by relatives or others who allege that they are unable to bear the expense of the burial on account of poverty, it has been the practice of the department to make careful inquiries into all the circumstances, particularly to ascertain whether the deceased person was insured in any benefit society, and, as a result, the expense of 4 burials was afterwards recovered.

### **Common Lodging-houses.**

There were 4 common lodging-houses on the register at the beginning of the year, and all were granted renewal of registration. 94 visits of inspection were made during the year, and the premises were, with one exception, found in a fairly clean condition.

A large model lodging-house was on one occasion found to be in a most insanitary condition, but, on intimation being given to the keeper, matters were rectified.

### **Dairies, Cowsheds, and Milkshops.**

The number on the register at the beginning of the year was 1,386. Since then 6 have been added thereto, leaving a total of 1,392 at the close of the year.

534 visits of inspection were made by the Sanitary Officers to dairy premises during the year, and, in five instances, the premises were reported to be structurally defective. Notices were served on the owners and occupiers to have these defects remedied.

### **Houses Let in Lodgings.**

Despite the bye-laws regulating houses let in lodgings, or occupied by more than one family, overcrowding is known to have taken place, but in the absence of a sufficient number of houses it is difficult to find a remedy. The number of houses on the register at the end of the year was 374, and a few inspections were made by the sanitary staff.

### **Offensive Trades.**

There are still 14 private slaughter-houses in the district, and, in the course of the year, regular visits of inspection were made, when the premises were all found to be in a satisfactory condition.

There are 7 public slaughter-houses in operation belonging to the Local Authority. These are situated as follows:—Baillieston, Bellshill, Blantyre, Larkhall, Shotts, Stonehouse, and Strathaven.

*Knackery*.—The only other offensive business carried on in the Middle Ward Area is the knackery at Omoa, where the manufacture of manure is also engaged in. The operations continue to be conducted in a satisfactory manner.

### **Unsound Food.**

The inspections during the year were chiefly made in premises where the slaughtering of animals is carried on, or butcher meat exposed for sale. 11 seizures were made, and 1,712 lb. butcher meat, 140 lb. fish, 100 tins condensed milk, 33 tins fruit, 8 tins rabbit, 6 tins corned beef, 4 tins salmon, and 500 bananas destroyed. No prosecutions were instituted.

### **Burial Grounds.**

The various burial grounds throughout the district continue to be kept in good order, and the bodies satisfactorily interred.

J. MILLAR,  
*District Sanitary Inspector.*

District Offices,  
Hamilton, 30th July, 1921.

**STATEMENT BY SANITARY INSPECTOR OF PROCEEDINGS  
UNDER THE PUBLIC HEALTH AND OTHER ACTS DURING  
1920.**

	Number.
Subordinate Sanitary Inspectors Employed, - - - - -	11

**I.—NUISANCES.**

Complaints received, - - - - -	4,363
Intimations served under Sec. 19, - - - - -	3,198
Notices served under Sec. 20, - - - - -	828
Cases in which legal proceedings were taken, - - - - -	5
Do. do. successful, - - - - -	5

**II.—WORKSHOPS.**

Inspections, - - - - -	252
Notices served under Sec. 2 (3) of Factory and Workshop Act, 1901, - - - - -	13
Cases in which legal proceedings were taken, - - - - -	0
Do. do. successful, - - - - -	0

**III.—TENTS AND VANS.**

Inspections, - - - - -	144
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**IV.—UNDERGROUND DWELLINGS.**

Reported to Local Authority, - - - - -	0
Notices to Owners (Sec. 74), - - - - -	0
Cases in which legal proceedings were taken, - - - - -	0
Do. do. successful, - - - - -	0

**V.—COMMON LODGING-HOUSES.**

On Register at 1st January, 1920, - - - - -	4
Registered during year, - - - - -	2
Renewals of Registration, - - - - -	2
Removed from Register, - - - - -	2
On Register at 31st December, 1920, - - - - -	4
Common Lodging-Houses belonging to the Local Authority, - - - - -	0
Inspections between 8 A.M. and 10 P.M., - - - - -	81
Inspections between 10 P.M. and 8 A.M., - - - - -	13
Intimations of Irregularities sent to Keepers, - - - - -	1
Cases of Infectious Disease reported to Medical Officer (Sec. 97), - - - - -	0
Unregistered Premises dealt with, - - - - -	0
Cases in which legal proceedings were taken (breaches of bye-laws, &c.), - - - - -	0
Do. do. successful, - - - - -	0

## VI.—HOUSES LET IN LODGINGS.

	Number.
On Register at 1st January, 1920, - - - - -	374
Registered during year, - - - - -	0
Removed from Register, - - - - -	0
On Register at 31st December, 1920, - - - - -	374
Inspections, - - - - -	11
Cases in which legal proceedings were taken, - - - - -	0
Do. do. successful, - - - - -	0

## VII.—INFECTIOUS DISEASES.

Visits of Inquiry, &c. (mostly carried out by 14 Nurse Inspectors), -	25,846
Patients removed to Hospital, - - - - -	1,816
Persons removed to House of Reception, - - - - -	0
Notices served under Sec. 50 (2) } - - - - -	0
Notices served under Sec. 53 (2) }	
Intimations to School Boards, Teachers, &c., - - - - -	6,577
Houses or Premises disinfected (mostly carried out by Nurse Inspectors), - - - - -	1,653
Sets of Clothing, Bedding, &c., disinfected or destroyed, - - -	1,653
Cases in which legal proceedings were taken, - - - - -	0
Do. do. successful, - - - - -	0

## VIII.—BURIALS.

Burials undertaken in terms of Sec. 69, - - - - -	13
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## IX.—DAIRIES, COWSHEDS, AND MILKSHOPS.

On Register at 1st January, 1920, - - - - -	1,386
Registered during year, - - - - -	6
Removed from Register, - - - - -	0
On Register at 31st December, 1920, - - - - -	1,392
Inspections, - - - - -	534
Contraventions of Orders or Regulations dealt with, - - - - -	5
Cases in which legal proceedings were taken, - - - - -	0
Do. do. successful, - - - - -	0

## X.—SLAUGHTER-HOUSES AND OFFENSIVE TRADES.

Applications under Sec. 32 for sanction to establish, - - - - -	0
Applications granted, - - - - -	0
Applications under Sec. 33 for License or Renewal of License, - - -	0
Applications granted, - - - - -	0
Public Slaughter-Houses belonging to Local Authority, - - - - -	7

SLAUGHTER-HOUSES AND OFFENSIVE TRADES—*Continued.*

	Number.
Private Slaughter-Houses, - - - - -	14
Unlicensed Slaughter-Houses dealt with, - - - - -	0
Inspections of Private Slaughter-Houses, - - - - -	19
Inspections of other Offensive Businesses, - - - - -	6
Number of such other Offensive Businesses at 31st December, 1920,	1
Cases in which legal proceedings were taken (breaches of bye-laws, &c.),	0
Do. do. successful, - - - - -	0

## XI.—UN SOUND FOOD.

Inspections under Sec. 43, - - - - -	17
Seizures of Unsound Food, - - - - -	11
Animals or carcasses or articles of food destroyed with owner's consent by or at the instance of the Sanitary Inspector, - -	11
Cases in which Owners of Unsound Food were prosecuted, - -	0
Convictions in connection with above cases, - - - - -	0

## XII.—SALE OF FOOD AND DRUGS ACTS.

*(Administered by County Council.)*

## XIII.—RAG FLOCK ACT, 1911.

Samples procured for analysis, - - - - -	0
Certified to conform to Board's standard, - - - - -	0
Certified not to conform to Board's standard, - - - - -	0
Cases in which legal proceedings were taken, - - - - -	0
Do. do. successful, - - - - -	0

## XIV.—BYE-LAWS.

Inspections in carrying out Bye-laws relating to—

(a) Pigstyes, - - - - -	452
(b) Public Conveyances, - - - - -	0
(c) Buildings, - - - - -	1,072
(d) Cleansing in Special Scavenging Districts, - - - - -	36,400
(e) Other sanitary matters, - - - - -	137



## Report of the Buildings Inspector.

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### Building Regulations.

The plans submitted during the course of the year amounted to 142, a large percentage of which had not been prepared according to the By-laws, thus necessitating considerable correspondence and numerous meetings before matters were adjusted. 3 sets of plans were withdrawn, while other 3 were found after examination to be outwith the scope of the By-laws. During the course of the construction of the buildings, 1,072 inspections were made, resulting in the detection of a number of contraventions, which were reported to and dealt with by the Committee.

Legal proceedings were instituted against a Colliery Company in Shotts Parish, in respect of their having erected a one-storey building which they were using as a dwelling-house, without first having submitted plans and obtained the written approval of the Local Authority thereto. The position taken up by the Company was that the building had been erected for the purpose of being used as a time office, but, owing to the scarcity of houses, one of their workmen had been temporarily accommodated in the building. The Sheriff, however, imposed a penalty of 30s.

588 applications of the smoke test were made to the drains and plumber work of new properties.

In addition to the plans lodged in terms of the Building By-laws, 41 plans were received and approval granted for various erections and alterations of a minor character.

Statistical tables are given in the Appendix. Table I shows the number of sets of plans lodged and classified according to the nature of the buildings to be erected, and may be summarised thus:—

NEW BUILDINGS UNDER BY-LAW No. 41.—Houses and shops, 62; workshops, 21; public buildings, 4; and other buildings, 7. Total plans, 94.

ALTERATION IN THE MODE OF OCCUPANCY OF EXISTING BUILDINGS UNDER BY-LAW No. 51.—Houses and shops, 32; workshops, 7; public buildings, 2; and other buildings, 1. Total plans, 42.

Table II shows the number of houses, classified according to size and the parish in which they were to be erected.

**Housing (Financial Assistance to Builders) Scheme  
(Scotland) 1920.**

40 plans were dealt with, of which 33 were found conform and 7 disconform to the regulations issued by the Scottish Board of Health. Operations were commenced in 20 cases, but only 1 had earned the subsidy up to the end of the year.

**Housing, Town Planning, &c. (Scotland) Act, 1919 (a), and  
Housing (Additional Powers) Act, 1919 (b).**

Applications for the erection of or conversion of existing premises into two-apartment houses, dealt with under (a) Section 44 (3).

For the demolition of or alteration in the use of existing dwellings under (b) Section 6 (5).

WILLIAM MARTIN,  
*Buildings Inspector.*

District Offices,  
Hamilton, 30th July, 1921.

TABLE I.—NUMBER OF SETS OF PLANS LODGED DURING THE YEAR 1920, IN ACCORDANCE WITH BY-LAWS 41 AND 51, CLASSIFIED ACCORDING TO THE NATURE OF THE BUILDINGS SET FORTH IN PLANS.

PARISH.	Plans lodged for New Buildings under By-law 41.				Plans lodged for alterations in mode of occupancy of Existing Buildings under By-law 51.			
	Houses and Shops.	Work-shops.	Public Buildings.	Others. †	Houses and Shops. *	Work-shops.	Public Buildings.	Others.
Avondale, - -	4	1	...	...	...	1	...	...
East Kilbride, -	5	2	...	...	4	...	...	...
Glasford, - -	1	...	...	...	...	...	...	...
Stonehouse, - -	...	...	...	...	1	...	...	...
Blantyre, - -	1	1	...	...	...	...	...	...
Bothwell, - -	15	1	1	...	9	1	1	1
Cambuslang, - -	7	1	...	2	4	...	1	..
Cambusnethan, -	10	2	...	1	4	1	...	...
Dalserf, - -	2	2	...	1	1	1	...	...
Dalziel, - -	2	2	...	1	...	1	...	...
Hamilton, - -	2	1	...	...	1	...	...	...
New Monkland, -	5	...	2	...	2	1	...	...
Old Monkland, -	1	4	...	...	2	...	...	...
Shotts, - - -	7	4	1	2	4	1	...	...
MIDDLE WARD, -	62	21	4	7	32	7	2	1
TOTAL FOR 1919, -	32	23	3	5	21	21	2	1

\* In this column are included plans for additions to existing dwelling-houses. In this way 26 apartments were added to 12 houses, situated mostly in Bothwell, Shotts, New Monkland, East Kilbride, and Cambusnethan.

† Two picture theatres are included in this.

TABLE II.—SHOWING NUMBER OF HOUSES AND SHOPS SET FORTH IN PLANS SUBMITTED UNDER BY-LAWS REGULATING THE BUILDING OR REBUILDING OF HOUSES OR BUILDINGS DURING 1920.

PARISH.	NEW BUILDINGS OF						TOTAL.
	One Apartment.	Two Apartments.	Three Apartments.	Four Apartments.	Five Apartments and upwards	Shops.	
Avondale, - -	...	1	1	...	1	...	3
East Kilbride, -	...	...	2	1	7	...	10
Glasford, - -	...	1	...	...	...	...	1
Stonehouse, -	...	...	...	...	...	...	...
Blantyre, - -	...	...	...	1	...	...	1
Bothwell, - -	...	...	385	188	41	6	620
Cambuslang, -	...	1	24	29	3	2	59
Cambusnethan, -	...	...	85	70	44	...	199†
Dalserf, - -	...	...	3	...	...	...	3
Dalziel, - -	...	...	...	6	...	...	6
Hamilton, - -	...	...	...	1	...	5	6
New Monkland,	...	...	...	1	2	2	5
Old Monkland, -	...	...	1	...	...	...	1
Shotts, - - -	...	...	12	4	2	2	20
MIDDLE WARD,	...	3	513	301	100	17	934
TOTAL FOR 1919,	...	6	23	6	24	16	75

† Includes 183 houses of the Burgh of Wishaw Housing Scheme which were within the Middle Ward Area and have been recently annexed under the Motherwell and Wishaw Amalgamation Act.

## Meat Inspection—Slaughter-houses, &c.

ALEXANDER CAMERON, A.R.SAN.I.

As General Superintendent of Public Slaughter-houses, and Inspector of Meat at those places, as well as at Private Slaughter-houses and places where meat is in preparation for the purpose of sale, I beg to submit the following report:—

During the period of the War I undertook, in addition to my usual work, the duties of Slaughter-house Government Agent until 4th July, 1920, when the removal of Government control of butcher-meat relieved slaughter-houses of certain restrictions. The removal of Government control resulted in a change in the distribution of cattle to the various slaughter-houses, as under the Dead-Weight-Basis System all cattle had to be slaughtered at certain slaughter-houses selected for the purpose. The statistics for this year, therefore, which are appended, do not show what might be termed the normal turnover for each Slaughter-house.

The slaughtering of horses at Baillieston Slaughter-house, which was commenced in the interests of Belgian refugees, still continues, the meat being now exported.

*Baillieston.*—TABLE I.—ANIMALS SLAUGHTERED, NUMBER HAVING CARCASSES WHOLLY OR PARTIALLY CONDEMNED, AND NUMBER HAVING ORGANS ONLY CONDEMNED.

Animals Slaughtered.		Carcasses condemned wholly or partially. Carcasses in which the Organs only were condemned.					
		Tuberculosis.			Other Diseases.		
		Carcasses.		Organs only.	Carcasses.		Organs only.
Class.	Number.	Wholly.	Partially.		Wholly.	Partially.	
Cows, -	132	3	9	42	1	—	—
Heifers, -	157	—	1	—	—	—	—
Bulls, -	8	—	—	—	—	—	—
Bullocks, -	123	—	—	—	—	—	—
Calves, -	60	—	—	—	3	—	—
Sheep, -	1,283	—	—	—	—	—	—
Swine, -	99	1	—	1	—	—	9
Horses, -	647	—	—	—	3	—	3
Total, -	2,509	4	10	43	7	—	12



*Baillieston.*—TABLE II.—OTHER DISEASES FOR WHICH CARCASSES WERE TOTALLY OR PARTIALLY CONDEMNED.

Disease.	Cows.	Calves.	Horses.	Total.
Emaciation, - - - -	—	—	2	2
Dropsical, - - - -	1	—	1	2
Septicæmia, - - - -	—	3	—	3
	1	3	3	7

*Bellshill.*—TABLE I.—ANIMALS SLAUGHTERED, NUMBER HAVING CARCASSES WHOLLY OR PARTIALLY CONDEMNED, AND NUMBER HAVING ORGANS ONLY CONDEMNED.

Animals slaughtered.		Carcasses condemned wholly or partially. Carcasses in which the Organs only were condemned.					
		Tuberculosis.			Other Diseases.		
Class.	Number.	Carcasses.		Organs only.	Carcasses.		Organs only.
		Wholly.	Partially.		Wholly.	Partially.	
Cows, -	1,568	41	171	546	12	4	143
Heifers, -	557	2	9	58	1	—	33
Bulls, -	197	—	1	30	—	1	6
Bullocks, -	1,217	—	10	142	3	—	71
Calves, -	2,160	20	—	—	4	—	2
Sheep, -	3,311	—	—	—	3	—	276
Swine, -	512	5	2	71	1	—	—
Total, -	9,522	68	193	847	24	5	531

*Bellshill.*—TABLE II.—OTHER DISEASES FOR WHICH CARCASSES WERE TOTALLY OR PARTIALLY CONDEMNED.

DISEASE.	Cows.	Heifers.	Bulls.	Bullocks.	Calves.	Sheep.	Swine.	Total.
Septicæmia, -	6	—	—	1	3	—	—	10
Septic Peritonitis, -	—	—	—	1	1	—	—	2
Dropsy, - -	4	—	1	—	—	—	—	5
Septic Metritis, -	2	—	—	—	—	—	—	2
Gastro-Enteritis, -	1	—	—	—	—	2	1	4
Braxy, - -	—	—	—	—	—	1	—	1
Abscess, - -	2	—	—	—	—	—	—	2
Injury, - -	1	1	—	1	—	—	—	3
	16	1	1	3	4	3	1	29

*Blantyre.*—TABLE I.—ANIMALS SLAUGHTERED, NUMBER HAVING CARCASSES WHOLLY OR PARTIALLY CONDEMNED, AND NUMBER HAVING ORGANS ONLY CONDEMNED.

Animals Slaughtered.		Carcases condemned wholly or partially. Carcases in which the Organs only were condemned.					
		Tuberculosis.			Other Diseases.		
Class.	Number.	Carcases.		Organs only.	Carcases.		Organs only.
		Wholly.	Partially.		Wholly.	Partially.	
Cows, -	3,380	48	315	791	8	—	4
Heifers, -	333	1	—	—	—	1	—
Bulls, -	84	—	—	—	—	—	—
Bullocks, -	620	—	—	1	—	—	—
Calves, -	31	1	—	—	—	—	—
Sheep, -	1,720	—	—	—	—	—	—
Swine, -	288	—	—	—	—	—	—
Total, -	6,456	50	315	792	8	1	4

*Blantyre.*—TABLE II.—OTHER DISEASES FOR WHICH ANIMALS WERE TOTALLY OR PARTIALLY CONDEMNED.

DISEASE.	Cows.	Heifers.	Bullocks.	Sheep.	Total.
Emaciation, - - -	7	—	—	—	7
Injury, - - -	1	1	—	—	2
	8	1	—	—	9

*Larkhall.*—TABLE I.—ANIMALS SLAUGHTERED, NUMBER HAVING CARCASSES WHOLLY OR PARTIALLY CONDEMNED, AND NUMBER HAVING ORGANS ONLY CONDEMNED.

Animals Slaughtered.		Carcases condemned wholly or partially. Carcases in which the Organs only were condemned.					
		Tuberculosis.			Other Diseases.		
		Carcases.		Organs only.	Carcases.		Organs only.
Class.	Number.	Wholly.	Partially.		Wholly.	Partially.	
Cows, -	844	7	43	492	1	—	24
Heifers, -	201	1	1	16	—	1	8
Bulls, -	67	—	1	11	—	—	1
Bullocks, -	497	—	—	26	—	—	17
Calves, -	32	—	—	—	—	—	—
Sheep, -	1,385	—	—	—	—	—	10
Swine, -	111	—	—	8	—	—	—
Total, -	3,137	8	45	553	1	1	60

*Larkhall.* — TABLE II.—OTHER DISEASES FOR WHICH CARCASSES WERE TOTALLY OR PARTIALLY CONDEMNED.

DISEASE.	Cows.	Heifers.	Calves.	Sheep.	Total.
Injury, - - - -	—	1	—	—	1
Peritonitis, - - -	1	—	—	—	1
Total, - - - -	1	1	—	—	2

*Shotts.*—TABLE I.—ANIMALS SLAUGHTERED, NUMBER HAVING CARCASSES WHOLLY OR PARTIALLY CONDEMNED, AND NUMBER HAVING ORGANS ONLY CONDEMNED.

Animals Slaughtered.		Carcases condemned wholly or partially. Carcases in which the Organs only were condemned.					
		Tuberculosis.			Other Diseases.		
Class.	Number.	Carcases.		Organs only.	Carcases.		Organs only.
		Wholly.	Partially.		Wholly.	Partially.	
Cows, -	346	—	11	70	—	—	5
Heifers, -	127	1	—	8	—	—	2
Bulls, -	45	1	—	3	—	—	—
Bullocks, -	589	—	1	22	—	—	10
Calves, -	2	—	—	—	—	—	—
Sheep, -	888	—	—	—	—	—	—
Swine, -	8	—	—	—	—	—	—
Total, -	2,005	2	12	103	—	—	17

*Stonehouse.* — TABLE I. — ANIMALS SLAUGHTERED, NUMBER HAVING CARCASSES WHOLLY OR PARTIALLY CONDEMNED, AND NUMBER HAVING ORGANS ONLY CONDEMNED.

Animals Slaughtered.		Carcases condemned wholly or partially. Carcases in which the Organs only were condemned.					
		Tuberculosis.			Other Diseases.		
Class.	Number.	Carcases.		Organs only.	Carcases.		Organs Only.
		Wholly.	Partially.		Wholly.	Partially.	
Cows, -	204	—	2	85	—	—	28
Heifers, -	115	—	—	4	—	—	20
Bulls, -	47	—	—	1	—	—	7
Bullocks, -	34	—	—	—	—	—	9
Calves, -	32	—	—	—	—	—	—
Sheep, -	421	—	—	—	—	—	29
Swine, -	68	—	—	—	—	—	—
Total, -	921	—	2	90	—	—	93

*Strathaven.* — TABLE I. — ANIMALS SLAUGHTERED, NUMBER HAVING CARCASSES WHOLLY OR PARTIALLY CONDEMNED, AND NUMBER HAVING ORGANS ONLY CONDEMNED.

Animals Slaughtered.		Carcases condemned wholly or partially. Carcases in which the Organs only were condemned.					
		Tuberculosis.			Other Diseases.		
Class.	Number.	Carcases.		Organs only.	Carcases.		Organs only.
		Wholly.	Partially.		Wholly.	Partially.	
Cows, -	698	7	23	328	6	4	227
Heifers, -	160	—	1	36	—	—	18
Bulls, -	59	—	—	17	—	—	8
Bullocks, -	21	—	—	1	—	—	2
Calves, -	144	—	—	—	1	—	—
Sheep, -	1,147	—	—	—	1	—	87
Swine, -	201	—	—	30	—	—	—
Total, -	2,430	7	24	412	8	4	342

*Strathaven.*—TABLE II.—OTHER DISEASES FOR WHICH CARCASSES WERE TOTALLY OR PARTIALLY CONDEMNED.

DISEASE.	Cows.	Calves.	Sheep.	Total.
Septicæmia, - - - -	3	—	—	3
Septic Abscess, - - - -	1	—	—	1
Septic Peritonitis, - - - -	1	—	—	1
Septic Mastitis, - - - -	1	—	—	1
Septic Metritis, - - - -	1	—	—	1
Gastritis, - - - -	1	—	—	1
Braxy, - - - -	—	—	1	1
Injury, - - - -	1	—	—	1
Decomposition, - - - -	—	1	—	1
Dropsical, - - - -	1	—	—	1
	10	1	1	12

The tables given in this report show in detail for each slaughter-house the class of animal slaughtered, and the extent to which disease was prevalent.



**BUILDINGS.**—The Committee's sanction has been given to the erection of considerable extensions at Bellshill and at Blantyre Slaughter-houses, providing accommodation for hanging dead meat, and instituting an overhead double-bar runway system in place of the single-bar runway, with a view to facilitating the handling of carcasses. At Bellshill Slaughter-house an outside shed, with pens for cattle and sheep, was also authorised.

**PRIVATE SLAUGHTER-HOUSES.**—During the year many inspections were made at private slaughter-houses, which still exist in Greengairs, Longriggend, Glengowan, Harthill, Newarthill, and Cleland. The butchers' shops in these districts were also inspected from time to time. Private slaughter-houses have been permitted to continue in existence for some time without licence from the Local Authority, pending the decision of the District Committee as to what extent these private slaughter-houses were necessary. In no case has the owner interfered with the procedure of inspection; indeed, in some cases the Meat Inspector has been called in to examine a carcass where fitness for human food appeared doubtful.

**UN SOUND MEAT.**—As a result of the inspections referred to in the preceding paragraph, six seizures were made, and 1712 lb. meat condemned. It was not considered necessary to institute legal proceedings in any case. In addition, about 8 cwt. pork and about 17 cwt. viscera were condemned as a result of special inspections at a piggery at Calderwood, East Kilbride.

Some of the diseases of animals dealt with during the year require to be specially referred to:—

#### CONGENITAL TUBERCULOSIS IN PIGS.

In the Annual Report for the years 1911 and 1912 special reference is made to the subject of congenital tuberculosis in the bovine, and the following information on the pig is in many respects analogous to the observations then made:—

In the summer of the year 1919 I was present at the sale of a litter of 8 young pigs. This litter was afterwards divided into two lots of 4 pigs each. The animals of Lot A were fed on brock collected from house to house cooked together with meal, while those of Lot B were fed on slaughter-house refuse cooked together with meal. The progress of development of the pigs in both lots was fairly good.

The animals of Lot A, when slaughtered and examined at Bellshill Slaughter-house, were found to be slightly affected with tuberculosis, all four carcasses showing evidence of the disease in the sub-maxillary glands, and two of them also in the cervical glands. One or two small lesions were also found in the mesenteric and in the portal glands, and in one case there was evidence of tuberculosis in the bronchial glands. There was semi-calcification in practically all the lesions.

On account of the conditions revealed above, particular interest was taken in the animals comprising Lot B. These were also slaughtered in Bellshill Slaughter-house, and examination revealed conditions almost identical to those found in Lot A, the variation being so slight that further details of the lesions are not necessary, except to state that in one of the pigs difficulty was experienced in finding macroscopic lesions in any part of the carcase except the sub-maxillary glands, where the lesions were very small.

These 8 young pigs all appeared healthy from birth till the time they were slaughtered eight months later. Having due regard to the facts, I was strongly of opinion that I was here dealing with congenital tuberculosis. I therefore called on the owner of the sow which had given birth to the pigs referred to, and intimated to him my opinion that the sow was unsound, tubercle having been found in all of her last litter. The owner maintained that the sow was healthy. I learned that she was due to farrow again on a particular date, and before leaving the premises I examined her carefully, but found her to all appearances healthy.

The date when she was expected to farrow duly arrived, but she did not prove fertile, and the owner decided to fatten her for slaughter. This infertility was, to my mind, further proof of the sow's unsoundness, and, fortunately, after fattening off, she was sent to Bellshill Slaughter-house for slaughter, and I was able to make a complete *post-mortem* examination, with the following result:—

The sub-maxillary lymphatic glands were clear, except for one small calcified tuberculous lesion in the left gland. Practically no other evidence of disease was found throughout the carcase, either in lymphatic glands or viscera, with the exception that the walls of the uterus were much thickened, and the cavity of the organ contained a whitish, odourless pus. The uterus was examined in the Bacteriological Laboratory, and no tubercle bacilli were found

in the smear preparations from the walls, but smear preparations from the pus in the cavity contained a few tubercle bacilli.

The distribution of the disease in the young pigs referred to above is typical of congenital tuberculosis as I have found it in the bovine.

#### SWINE PLAGUE.

The pigs in a section of the piggery at the Home Farm at Calderwood, East Kilbride, were found to be affected with a disease, from which a number of the animals died. The matter was reported to the Inspector under the Contagious Diseases of Animals Act, and was also brought to the notice of the Veterinary Officer of the Board of Agriculture. The presence of swine fever in the herd was suspected, and an Isolation Order was accordingly served on the owners, prohibiting the removal of the stock. As, however, deaths among the animals continued to be of frequent occurrence, the Manager became alarmed, and requested the Public Health Department to furnish him with a special licence to slaughter on the premises. This was granted, subject to the approval of the Board of Agriculture, and arrangements were made for the slaughter of 136 pigs. *Ante-mortem* examination of the stock revealed no symptoms of disease, other than a slight cough in some cases, the animals being all well nourished, and in good condition.

On 16th February, 76 pigs were slaughtered and examined in the interests of the Public Health Department, while the Veterinary Surgeon of the Board of Agriculture also examined the pigs for evidence of the presence of swine fever. No evidence considered to be specific of that disease was found, but I was much impressed with the large percentage of pigs showing slight patches of pneumonia affecting the anterior lobes of the lungs, the consolidation being of fibrous nature and giving a rubber-like feel to the touch. There were also necrotic areas which resembled tuberculous lesions, but those I consider were non-tubercular, although, as stated below, tubercle was found in some cases.

On 17th February the remaining 60 pigs were slaughtered, and again no evidence considered typical of swine fever could be found. Tubercle was found, however, in many of the carcasses, and the pneumonia referred to above was again a prominent feature.

*Post-Mortem Notes.*—Tubercle was found in 46 per cent. of the carcasses. Fibrous pneumonia was present in anterior lobes, showing

necrotic centres with caseation. Pericarditis was found in most cases, involving the pericardium and epicardium more or less, and in some cases the adhesions extended to the pleura. There was no evidence of endocarditis. Adhesions were present in the abdomen in two carcasses. The kidneys in many of the animals were normal, but in quite a number there was distinct hæmorrhagic nephritis. Specimens of the various lesions present in some typical cases were taken to the Bacteriological Laboratory, where examination revealed the presence of swine plague. (See County Report, in the section relating to the Bacteriological Laboratory.)

Two pigs in the piggery at Bellshill Slaughter-house were found to be dull, and sleepy, with eyes red and discharging a yellow substance which crusted round the eyelids, inappetence, or, when food taken, vomiting. There was excessive discharge of urine at one time, followed by cessation of urine and constipation, swelling of the legs below the hocks, and general stiffness; the pigs ultimately refused food entirely, and showed marked evidence of intoxication and discolouration (light red) along underline and to some extent on the ears. A few days later the remainder of the stock betrayed some of the early symptoms of swine fever, and I had the full stock slaughtered immediately and carried out a careful *post-mortem* examination of each carcase.

*Post-Mortem Notes.*—In every case there was a typical pneumonia of fibrous nature, affecting the anterior lobes of the lungs, more or less. In the advanced cases there was some enlargement of the bronchial glands and other lymphatic glands of the body. Necrotic or caseated lesions were absent. In one case there was evidence of gastritis, with one distinct ulcer, about the size of a shilling, on the mucous membrane of the stomach, and in another there was slight inflammation of the mucous membrane, but no ulceration. In the latter case, however, there was also extensive œdema of the subserous tissues, forming a thick coating of straw-coloured jelly-like substance round the whole stomach. With one exception the intestines were normal. In the intestines of the exceptional case, a few feet beyond the pyloric orifice, evidence of slight inflammation was found, but no ulceration. In the advanced cases there was cloudy swelling of the liver, and the kidneys revealed hæmorrhagic nephritis. There was, in nearly every case, some degree of inflammation of the pleura, pericardium, and epicardium, but only in one case were the pleura and pericardium adherent, and in no case was there any evidence of endocarditis. Although the nephritis referred



to, is, according to some authorities, characteristic of so-called swine erysipelas, in that disease the endocarditis is an outstanding feature.

The clinical symptoms and post-mortem appearances appeared to me to be of a mixed nature, pointing in one way or another to swine erysipelas, swine fever, or swine plague. The fibrous pneumonia and pericarditis, typical of the last-named disease, together with the absence of endocarditis, and, except in one case of bowel lesions, pointed to the disease being what is called swine plague, and specimens from the most advanced cases, examined in the bacteriological laboratory, confirmed the presence of swine plague. The pneumonia and other pathological conditions found were similar in appearance to those previously reported from the piggery at Calderwood Castle Estate.

On 22nd April, 1920, my attention was drawn to the carcase of a six months old brand pig, slaughtered at Larkhall Slaughter-house after having suffered from some disease which was thought to have been pneumonia. This pig had only recently come from England.

A careful examination revealed the fact that the carcase was in very poor condition and slightly wet, but showing no outstanding lesions either in the carcase itself or in the viscera, with the exception of patches of pneumonia of considerable extent on the anterior lobes of the lungs. In view of my experience at the piggeries at Calderwood and at Bellshill Slaughter-house, I diagnosed the condition as swine plague, and took a portion of the affected lung to the Bacteriological Laboratory, where bacteriological examination confirmed my diagnosis.

From the evidence just submitted it appears to me that swine plague may be present in a herd without any definite manifestation of illness beyond such as points to slight involvement of the respiratory tract, or on the other hand that the disease may show itself chiefly by the appearance of symptoms indicative of a general toxæmia, accompanied by gastric disturbance, and, it may be, by signs of acute nephritis.

*Post-mortem*, the presence of patches of pneumonic consolidation, especially of the anterior lobes, of nephritis, of inflammation to some extent of the gastric mucosa, of pericarditis and pleurisy, together with the absence of any involvement of the endocardium or of the intestine, are, in my opinion, the findings on which a diagnosis of swine plague can confidently be arrived at, while the pneumonic condition described, even if the only sign of disease in the whole carcase, should always be regarded with the greatest suspicion.



## COUNTY HOSPITAL,

NEAR

## MOTHERWELL.

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REPORT BY THE PHYSICIAN-SUPERINTENDENT,  
JOHN REID, M.D., D.P.H.

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1920.

At the beginning of the year there were in residence 187 patients; 1,950 cases were admitted, making a total of 2,137 under treatment during the year. Of these, 1,772 cases were discharged recovered or improved, 105 died, and 260 were in hospital at the end of the year.

The total admissions for the year exceeded by 381 the figure for any previous year. This was chiefly due to the great increase in SCARLET FEVER which, after a marked decline in 1918, rose rapidly in 1920. The percentage of mild cases of the disease was also increased. 81 per cent. were classified as mild, and the fatality rate was only 1 per cent.

In DIPHTHERIA there was a slight increase in the total number of admissions, and a decrease in the fatality rate, which was 9 per cent. of the total discharges.

The number of cases of ENTERIC FEVER was very small, only 59 being notified, as compared with 118 for the previous year. The fatality rate was 7.1 per cent.

During the previous five years (1915-19), only 76 cases of PUERPERAL FEVER were admitted. This year, 39 cases were admitted. Whether the disease was more prevalent during 1920 than previously is not apparent. Many of the cases were septicæmic on admission.

With regard to PNEUMONIA more falls to be said. This disease is now notifiable, and consequently frequent requests are made by medical practitioners for removal of cases to hospital. Only 55 cases were admitted, and it was only possible to treat this number

as enteric fever cases were few. Frequently the medical practitioner in requesting removal of a case of pneumonia states "there is no one at home to nurse the patient," or "the home conditions are such that the patient has little hope of recovery unless removed to hospital." Still there is only spasmodic accommodation for pneumonia cases when another disease like enteric fever is quiet.

More than half of the cases notified as CEREBRO-SPINAL FEVER were wrongly diagnosed. The mortality was high.

In SURGICAL TUBERCULOSIS and VENEREAL DISEASES much useful work was accomplished throughout the year.

The greatest number of patients admitted on any one day was 20, on 26th October. The greatest number admitted during one week was 65, in the week ending 30th October; and during one month, 235, in December.

The average daily number of patients resident was 201·6.

The greatest number resident was 289, on 28th December, and the smallest 134, on 25th July.

The average duration of residence of all patients discharged was 38·9 days; of all recovered cases, 40·3 days; and of all fatal cases, 9·2 days.

The fatality rate, calculated on all the discharges was 5·5 per cent. Excluding 18 cases who died within 24 hours of admission to hospital, the fatality rate falls to 4·3 per cent.

The diagnosis of the medical attendant was revised in 255 cases, or 18·5 per cent. of the discharges.

Request for removal of patients to hospital was made by the medical practitioner in attendance in 564 cases, and by the Public Health Department in 1,386 cases.

### **Enteric Fever.**

At the beginning of the year there were 5 cases in hospital. During the year, 59 patients were admitted as enteric cases; 16 were wrongly diagnosed. 1 case of influenza proved to be enteric fever. The total number of clinical cases treated throughout the year was 49. Of these, 39 were discharged well, 3 were fatal, and 7 were in hospital at the end of the year.

REMOVAL TO HOSPITAL was carried out during the first week of illness in 4 cases, or 9·5 per cent.; during the second week in 23

cases, or 54.7 per cent.; during the third week in 11 cases, or 26.1 per cent.; and later in 4 cases, or 9.5 per cent. More than half the cases were removed during the second week of illness.

THE AVERAGE DURATION OF RESIDENCE of all cases was 56.6 days; of recovered cases, 60 days; and of fatal cases, 11.6 days.

FATALITY RATE.—In 3 cases, or 7.1 per cent., fatal issue resulted. These 3 cases were all serious, 2 dying from toxæmia and 1 from pneumonia.

TYPE OF DISEASE.—11 cases were classified as mild, 11 as moderately severe, and 20 as very severe.

COMPLICATIONS.—16 cases, or 38 per cent. of the discharges, had one or more complications. The complications were:—Bacilluria, 3; bronchitis, 1; delirium, 3; nephritis, 1; perforation, 2; pneumonia, 2; pyelitis, 1; recrudescence, 1; relapse, 3; thrombosis, 1.

TWO CASES OF PERFORATION WITH RECOVERY.—H.H., aet. 17 years, was admitted on the eleventh day of disease, moderately ill. On the sixteenth day of illness he had a hæmorrhage. He remained comparatively comfortable until the twenty-second day of disease, when he complained of sudden onset of abdominal pain in the epigastric region. Abdominal rigidity and increase in the pulse rate developed. Within 2½ hours the abdomen was opened, revealing free fluid, gas, and intensely inflamed small intestine. However, no perforation was discovered. The patient was so ill that an exhaustive search could not be made. An appendicostomy was performed, and the patient put back to bed. The patient slowly recovered. It was thought that the perforation possibly in the large intestine had become sealed off. The case is a most unusual one, as perforations without stitching up almost invariably die.

W.G., aet. 38 years. This patient perforated on the twenty-third day of disease. Laparotomy was performed 4 hours after the bowel perforated. He was very ill for three weeks, but ultimately made a good recovery.

CORRECTED DIAGNOSIS.—Bronchitis, 2; cancer, 1; influenza, 1; negative, 3; pleurisy, 1; pneumonia, 1; positive Widal, 7.

### Scarlet Fever.

At the beginning of the year there were 134 cases of scarlet fever in hospital. During the year, 1,128 cases were admitted. Of these,

96 were found to be suffering from some other disease, or were classified as doubtful. 1 case took scarlet fever while in hospital. 1 case notified as cerebro-spinal fever, and 15 notified as diphtheria, proved to be cases of scarlet fever. There were thus 1,183 genuine cases of scarlet fever under treatment during the year, and of these, 985 were discharged well, 10 died, and 188 were in hospital at the end of the year.

REMOVAL TO HOSPITAL took place in 37·7 per cent. of the cases on the third day of illness or earlier.

THE AVERAGE DURATION OF RESIDENCE of all cases discharged was 44·9 days; of recovered cases, 45·3 days; and of fatal cases, 6·7 days.

THE FATALITY RATE, as calculated on the discharges, was 1 per cent.

TYPE OF DISEASE.—806, or 81 per cent., of the cases discharged were classified as mild; 130, or 13 per cent., as moderately severe; and 59 or 5·9 per cent., as very severe.

COMPLICATIONS.—48·2 per cent. of the total discharges had complications. The complications were:—Suppurative cervical adenitis, 8; non-suppurative adenitis, 144; otitis media purulenta, 74; rhinitis, 138; endocarditis, 36; nephritis, 7; joint pains, 32; mastoiditis, 2; pulmonary complications, 6. Other conditions accompanying the scarlet fever were abscesses, 4; blepharitis, 3; bronchitis, 11; burn, 2; conjunctivitis, 4; dacryocystitis, 1; diarrhoea, 3; eczema, 4; herpes, 3; ichthyosis, 1; impetigo, 1; paronychia, 14; psoriasis, 3; positive blood, 1; scabies, 6; septic toes, 2; sty, 1; tinea, 2; tonsillitis, 5; tuberculosis, 3; urticaria, 3; vaginitis, 2. 2 cases desquamated twice; 3 cases were discharged with chronic discharging ears.

MIXED INFECTIONS.—Positive swabs, 10; chickenpox, 2; erysipelas, 1.

RETURN CASES.—The return period is taken as 28 days. The presumably "infective cases" numbered 35. (Apparently they infected 33 other children.) Their average stay in hospital was 40·6 days, as compared with 45·3 days for all recovered cases. The maximum stay in hospital was 69, and the minimum 30 days. 30 were mild cases, 4 moderate, and 1 severe. 26 were clean in hospital, and 9 had some complication while in residence. It should be noted

that 2 so-called "infecting" cases had not scarlet fever; 1 case admitted with diphtheria from same house, to which 2 cases of scarlet fever were discharged the same day; and that 5 so-called "return" cases took ill the same day or the day before the "infecting" case left hospital.

### Diphtheria.

There were in hospital at the beginning of the year 38 cases of diphtheria, and 313 were admitted during the year. Of these 351 cases, 104 were wrongly diagnosed. 1 notified as scarlet fever proved to be diphtheria. 191 cases were discharged well, 19 died, and 38 were in hospital at the end of the year.

REMOVAL TO HOSPITAL was carried out in 39.5 per cent. of the cases within the first three days of illness. The figure for the previous five years was 45 per cent.

DURATION OF RESIDENCE.—The average duration of residence of all cases was 50.2 days; of recovered cases, 54.6 days; and of fatal cases, 6.6 days.

TYPE OF DISEASE.—Faucial—141 recovered, 3 fatal; laryngeal—32 recovered, 8 fatal; nasal—1 fatal; faucial and laryngeal—11 recovered, 2 fatal; faucial and nasal—6 recovered, 3 fatal; faucial, nasal, and laryngeal—1 recovered, 1 fatal; nasal and laryngeal—1 fatal.

COMPLICATIONS.—Adenitis, 27; rhinitis, 4; otitis media, 9; cardiac involvements, 12; pulmonary complications, 17; paralysis, 13; albuminuria, 64. 44.2 per cent. of the discharges had no complication whatever.

DIPHTHERITIC PARALYSIS was observed in 13 cases, or 6.1 per cent. of the discharges.

Other conditions present on admission were:—Abscesses, 3; cellulitis, 1; conjunctivitis, 1; eczema, 1; ganglion, 1; ichthyosis, 1; joint pains, 1; chronic otitis media, 1; perforation of palate, 1; scabies, 2; tape worm, 1.

MIXED INFECTION.—Chickenpox, 2; measles, 1.

FATALITY RATE.—Of 210 discharges, 19 were fatal, giving a fatality rate of 9 per cent. Of the fatal cases, the average age was 4.3 years; the average day of disease, 5.5 days; the average residence, 6.6 days. The average amount of serum given was 44,600 units.



**RETURN CASE.**—A mild faucial case is said to have infected another case 13 days later. As the "return" case had diphtheria and scarlet fever, it is probable that the diphtheria in the return case was secondary to the scarlet fever.

**OPERATIVE TREATMENT.**—The operative rate of all the discharges was 13·8 per cent. In 2 cases where intubation was performed the children could not do without the tubes. In both cases emergency tracheotomies were done. Although secondary operations were done in both cases to get rid of the tubes, they are still retained.

In 25 instances intubation was performed; 17 recovered and 8 died. 1 case, which had tracheotomy performed, died. 3 cases had intubation and tracheotomy performed; all recovered.

**CORRECTED DIAGNOSIS.**—Positive swab, 34; sore throat, 35; tonsillitis, 2; negative, 4; pharyngeal abscess, 1; albuminuria, 1; impetigo, 1; bronchitis, 2; broncho-pneumonia, 4; measles, 4; phthisis, 1; scarlet fever, 15.

**ANTITOXIN.**—The average amount of serum given in all cases was 14,100 units. 8·3 per cent. of the cases had serum after-effects, chiefly an urticarial rash, and in no case were the signs serious.

### **Puerperal Fever.**

There were 4 cases of puerperal fever in hospital at the beginning of the year; 39 were admitted; 2 were wrongly diagnosed, and 2 others diagnosed other diseases proved to be puerperal fever. Of these 43 cases, 25 were discharged well, 11 died, and 7 were in hospital at the end of the year.

**TYPE OF DISEASE.**—7 were mild, 10 moderately severe, and 19 very severe.

**THE AVERAGE AGE** of the cases was 30·1 years; the average day of disease on admission, 9·1 days; and the average stay in hospital was 30·2 days.

**THE FATALITY RATE** was 30·5 per cent.

**ATTENDANCE AT BIRTH.**—Of the cases discharged, medical practitioners attended in 16 cases; midwives in 10; and not stated, 10.

**COMPLICATIONS AT BIRTH.**—Instruments, 8; Cæsarian section, 1; retained placenta, 1.

COMPLICATIONS DURING THE FEVER.—Bacilluria, 2; nephritis or albuminuria, 5; anaemia, 3; thrombosis, 5; scarlet fever, 1; pneumonia, 1; pelvic abscess, 1.

TREATMENT.—Fowler's position; examination of interior of uterus on admission; intravenous collosol iodine; quinine sulphate by mouth.

### **Erysipelas.**

1 case was in hospital at the beginning of the year; 33 were admitted; 4 were wrongly diagnosed; and 1 case notified scarlet fever proved to be erysipelas. Of the 31 cases, 24 were discharged well, 4 died, and 3 were in hospital at the end of the year.

TYPE OF DISEASE.—Mild, 7; moderate, 7; severe, 14.

SITUATION OF DISEASE.—Face, 24; arm, 1; leg, 1; wandering, 1.

THE AVERAGE AGE was 38·6 years; the average day of disease on admission was 9 days; and the average residence was 20·2 days.

FATALITY RATE was 14·2 per cent. of the discharges.

COMPLICATIONS. — Cellulitis, 2; delirium, 1; septicæmia, 1; bronchitis, 1.

### **Cerebro-Spinal Fever.**

1 case of cerebro-spinal fever was in hospital at the beginning of the year; 29 were notified; 16 proved to be wrongly diagnosed; and 1 case notified as pneumonia proved to be cerebro-spinal fever. Of these 15 cases, 1 recovered, 13 died, and 1 was in hospital at the end of the year.

THE AVERAGE AGE was 7·9 years, and 11 were under 10 years of age; the average duration of illness on admission was 9·2 days.

TYPE OF DISEASE.—All cases were of the serious type; 6 of them were fulminating.

TREATMENT.—Polyvalent sera were used in most of the cases. In a few, the type serum obtained from the army authorities was used.

### **Tuberculosis.**

107 cases were admitted; 4 were wrongly diagnosed; and 7 others proved to be cases of tuberculosis. Of those 110 cases, 103 were discharged in varying stages of improvement, and 7 were fatal.

CLASSIFICATION OF CASES.—Glandular, 63; bone, 16; skin, 10; pulmonary, 6; general, 5; others, 2; abdominal, 1; meningeal, 7.

THE AVERAGE AGE of the non-pulmonary cases was 13·3 years; and the average duration of residence, 33·2 days.

GLANDULAR CASES.—The majority of the glandular cases had gone on to abscess and sinus formation. In 43 of the cases, opening or scraping abscesses was performed; in 15, excision was possible; and in 5, no operation was done. In 21 cases the disease was apparently arrested; 38 were markedly improved; and 4 were in *statu quo*.

OSSEOUS CASES.—Of the 16 bone cases, 14 had sequestra removed or bony sinuses excised. With judicious, conservative treatment this class of case often makes wonderful recoveries.

SITE OF DISEASE.—Malar, maxilla, sternum, spine, humerus, elbow, radius, metacarpal, hip, knee, tibia, calcaneum, metatarsal.

SKIN CASES.—Of the 10 cases, 8 were lupus. Rapid and good results were obtained by scraping.

Of the other NON-PULMONARY CASES, 5 were generalised tuberculosis, 1 abdominal, 1 dacryocystitis, 1 tendon lengthening after old contracture.

MENINGEAL CASES.—The 7 cases of meningeal tuberculosis died.

PULMONARY CASES.—6 cases had an average residence of 17·9 days, waiting for beds in sanatoria or admitted for an urgent operation.

### **Pneumonia.**

Although pneumonia is now a notifiable disease no separate accommodation for its treatment is available. It is only when beds become vacant in the enteric ward that a few cases can be admitted to the hospital. In this disease, as in enteric fever, much depends on skilful nursing. Even under the condition of deficient accommodation a fair amount of useful work was accomplished during the year.

1 case was in residence at the beginning of the year; 55 were notified; 8 were wrongly diagnosed; and 9 cases notified as other diseases proved to be pneumonia. Of those 57 cases, 33 recovered, 17 died, and 7 were in hospital at the end of the year.

7 of the recovered cases were influenzal-pneumonia, and 26 ordinary lobar pneumonia. Of the 17 fatal cases, 2 were double pneumonia, 4 ordinary pneumonia, 6 broncho-pneumonia, and 5 influenzal-pneumonia.

THE AVERAGE AGE of the cases was 24.9 years; the average day of disease on admission, 8.3 days; and the average residence in hospital, 20 days.

1 case developed an empyema.

### **Influenza.**

9 cases of this disease were treated. 4 were mild in type, 2 moderate, and 3 severe. All the cases recovered. The average residence in hospital was 24 days.

### **Measles.**

10 cases were notified; 1 was wrongly diagnosed; 10 others proved to be measles.

16 cases were discharged well and 3 died.

THE AVERAGE AGE was 7.8 years. 4 of the patients were adults.

THE AVERAGE RESIDENCE in hospital was 29 days.

CORRECTED DIAGNOSIS.—Scarlet fever, 3; diphtheria, 4; pneumonia, 3.

COMPLICATIONS.—Chickenpox, 1; pneumonia, 1; bronchitis, 1; intubation, 1; suppurative adenitis, 1.

### **Tinea Tonsurans.**

5 cases were admitted to hospital for treatment. 3 were X-rayed.

### **Other Conditions.**

Convulsions, 1; malnutrition, 1; prematurity, 1; adenitis, 1; eclampsia, 1; tonsils and adenoids, 2; pyelitis, 1; bronchitis, 1; rheumatism, 1; born in hospital, 1; contact, 1; retained tube, 1; tetanus, 1; trachoma, 1; sore throat, 4; septic cases, 7.

### **Venereal Diseases.**

Much useful work continues to be done in both outdoor and indoor departments in the treatment of venereal diseases. The total

new cases seen during the year was 550. There were 124 indoor cases, and 7,742 outdoor attendances. The number of days' treatment of indoor cases was 2,570.

**OPHTHALMIA NEONATORUM.**—Only 9 cases of this disease were sent into hospital. 1 of them proved to be non-gonorrhœal in origin. Of the 8 true cases, 3 were mild, 2 moderately severe, and 3 very severe.

**THE AVERAGE RESIDENCE** was 33·7 days.

**EYESIGHT.**—5 recovered without impairment to vision, 1 with slight impairment, and 2 were totally blind. The 3 cases where ulceration was present were admitted in that state. The 2 blind cases were admitted blind.

The number and nature of the cases treated and the areas from which they came are shown in the following table:—

LOCALITY..	Syphilis.	Gonorrhœa.	Syphilis and Gonorrhœa.	Soft Sore.	Others V.D.	Others Non. V.D.	Total.	Indoor Cases.	Indoor Days.	Outdoor Atten- dances.
Middle Ward, -	67	57	11	1	7	57	200	46	1,034	2,918
Upper Ward, -	4	4	—	—	1	6	15	4	78	218
Lower Ward, -	2	—	—	—	—	1	3	1	52	5
Airdrie, -	4	4	1	—	1	9	19	5	92	110
Coatbridge, -	17	3	2	1	1	14	38	13	201	160
Dumbarton, -	1	—	—	—	—	—	1	—	—	18
Edinburgh, -	—	1	—	—	—	—	1	—	—	2
Glasgow, -	1	2	—	—	—	—	3	—	—	12
Hamilton, -	30	32	4	—	2	19	87	17	456	1,315
Kilmarnock, -	—	1	—	—	—	—	1	—	—	3
Lanark, -	1	1	1	—	1	1	5	2	54	75
Largs, -	1	—	—	—	—	—	1	—	—	15
Motherwell, -	37	32	3	1	4	26	103	20	356	1,643
Rutherglen, -	—	—	—	2	—	2	4	2	34	18
Wishaw, -	21	25	2	4	1	14	67	12	187	1,222
Alloa, -	—	—	—	1	—	—	1	1	13	3
Wanlockhead, -	1	—	—	—	—	—	1	1	13	5
Totals, -	187	162	24	10	18	149	550	124	2,570	7,742

### Encephalitis Lethargica.

12 cases were admitted as encephalitis lethargica. Of these, 3 cases recovered, 4 died, and 5 were wrongly diagnosed or doubtful.

As little is known about the condition, a few details may be of some interest.



SEX.—Of the 7 cases, 3 were males and 4 females.

AGE INCIDENCE.—The youngest case was 17 years of age, 3 were 22 years, 1 was 35 years, 1 was 37 years, and 1 was 50 years.

DAY OF DISEASE.—4 cases had been ill from 6 to 10 days, and 3 from 11 to 23 days.

ONSET.—In 2 cases the onset was more or less abrupt, with sickness, vomiting, and headache. In the others a history of gradual onset of tiredness, sleepiness, and general lethargy was obtained from the patients themselves.

LETHARGY.—This sign was well marked in all the cases. In 1 the lethargy was extreme. Although the patients practically slept all the time, they could be roused to answer questions and to feed. In 1 case only was delirium marked. In no case was insomnia present.

MUSCULAR SYSTEM.—In all cases muscular weakness was quite noticeable. One man, who ultimately recovered, lay like a log for several weeks. In his case wasting was extreme. He developed bed sores all over his bony prominences. In his case, also, rigidity of the muscles of the limbs was present.

TREMOR.—In the same case a coarse tremor developed, which prevented him from feeding himself for a time. Another case had a peculiar fine tremor of the facial muscles, only noticeable when asleep. When she was roused the tremor was under complete control.

REFLEXES.—In 4 cases the deep and superficial reflexes were normal, in 1 lost, in 1 sluggish, and in 1 the knee jerks only were lost. The 3 cases which recovered were continent, but the 4 fatal cases lost control of bladder and rectum.

SPEECH.—Speech was slow and monotonous in all cases.

PARALYSIS.—4 cases had paresis of the upper eyelids, 1 had unequal pupils and deflection of the tongue to one side. 1 case, who recovered, had marked paralysis of the extensor muscles of one forearm and double drop foot.

PYREXIA.—The temperature was raised in all cases. In the fatal cases 104° F. to 105° F. was the rule, although in 1 case it was normal until just before death, when it reached 101° F. The pulse and respiration corresponded to the pyrexia.

URINE.—3 of the fatal cases had albuminuria. In no case was hæmaturia present.

**CEREBRO-SPINAL FLUID.**—In 6 of the cases the cerebro-spinal fluid was under pressure quite clear, containing an excess of small mononuclear cells. No organisms were found. Guinea-pigs inoculated for tubercle were normal.

**TREATMENT.**—In addition to the ordinary hygienic treatment of the mouth and gastro-intestinal tract, collosol iodine was given intra-spinally without any definite result.

1 case, a male, aet. 35 years, is of some interest on account of the severity of the attack, long illness, and ultimate recovery. This patient had what appeared to be influenza a month before he came into hospital. After the "influenza" there was a gradual onset of muscular weakness and nervous depression. When admitted to hospital there was distinct depression, marked muscular weakness, but no sensory changes and no ocular paralysis. The patient gradually became extremely lethargic and muscular wasting rapidly developed. The face was expressionless, and there was little movement of the muscles when he spoke. Double drop foot developed, and the extensor muscles of the left forearm were paralysed. He was quite continent during his whole illness. For a period the muscular weakness and tremor were so extreme that he could not feed himself. After nearly seven months' residence in hospital, he was discharged recovered.

### Operations.

During the year the following operations were performed:—

DISEASE, &c.	NUMBER OF OPERATIONS.		
	Cases Recovered or Improved.	Cases Died.	Total.
Enteric Fever, - - -	2	...	2
Diphtheria, - - -	21	9	30
Tuberculosis, - - -	94	...	94
Venereal Diseases, - - -	27	...	27
Trachoma, - - -	1	...	1
Infantile Paralysis, - - -	1	...	1
Septic Cases, - - -	10	...	10
	<hr/> 156 <hr/>	<hr/> 9 <hr/>	<hr/> 165 <hr/>

The Consulting Surgeon, Dr. M'Lennan, performed 3 laparotomies, 1 tendon lengthening, and 1 thyrotomy. Dr. Manson, Consulting Eye Surgeon, performed 1 excision of conjunctiva.

### **Buildings and Grounds.**

**NEW CUBICLE PAVILION.** — This building has been provided to accommodate extra staff, and has been erected to the north of Pavilion 3. The structure is not in unison with the rest of the hospital buildings. The following are a few details supplied by the Architect:—

The building is one storey in height, and the over-all dimensions are 132 feet long and 33 feet 4 inches broad.

It consists of 20 rooms or cubicles and a ward kitchen or duty room, each 13 feet by 10 feet by 10 feet, giving a floor area of 130 superficial feet and a cubic area of 1,300 cubic feet.

The entrance is on the east side, and a central corridor, 6 feet wide, runs the full length of the building, at the ends of which are placed the sanitary annexes, consisting of bathroom, sink-room, and two water-closets at either end.

Off the entrance hall are situated nurses' lavatory, store and linen presses; and in the basement, a colorifier chamber and store for mattresses, with a duct for water, heating, and lighting services, connecting up to other hospital buildings.

The building is constructed of timber framing, resting on brick base and concrete foundations, the walls being covered on outside with coke-breeze slabs, 2-inch thick cement, roughcast on face, and lined internally with "Thistle Plaster Board," finished with "Hard-wall" plaster, the ceilings and partitions being finished with the same material. The roof is covered with grey asbestos-cement slates, the floors of cubicles and corridor are of timber, stained and polished, and the sanitary annexes and stores have granolithic paving.

Each room is provided with a wash-hand basin, having hot and cold water, and a low-pressure hot-water radiator. The lighting is by electricity.

**TENNIS COURT.**—A double ash tennis court has been constructed to the north of Pavilion 7, on a piece of ground which has been made up with the hospital engine-room ashes. It not only supplies a much-needed recreation place for the nursing staff, but has also totally altered and improved the aspect of an ugly coup.

**GARAGE HEATING.**—When the garage was built, gas for heating purposes was introduced. This has proved a most expensive method. A steam pipe has now been taken across in a small duct from Pavilion 1, and the heating is now satisfactory.

The coal-weighing machine was overhauled. A new iron bath replaced a damaged porcelain one in the Administrative Block. A new geyser was introduced into the old Lodge, which is at present used for staff accommodation.

### **Ambulance Work.**

For a long time, and more especially during the war period, the need for standardisation of the motor ambulances was felt. The difficulty in getting spare parts for three different cars, the non-interchangeability of wheels and tyres, resulted in much inconvenience. The old cars have, however, been disposed of. Three 20-h.p. Austin chassis, fitted with improved bodies, suitable for the work, are now running. The Ford delivery van, for removing clothes and taking convalescent cases home, has been an economical investment.

The total mileage run by the cars was 31,018 miles; 1,765 journeys were made—1,218, for admissions; 282, taking patients home; 117, removing tuberculous patients; and 148, removing clothes and on various other business.

### **The Staff.**

On 31st December, 1920, the total staff of the hospital numbered 107. Dr. Chalmers was appointed Assistant Medical Officer in January, 1920, and resigned in October, when Dr. Hunter took up duty.

**LECTURES.**—3 courses of lectures were given by the Physician-Superintendent—1 on elementary anatomy and physiology, to probationers; 1 on fevers and hygiene; and 1 on medical and surgical nursing, to senior nurses.

**EXAMINATIONS.**—10 nurses passed in anatomy and physiology (1 with distinction); 8 nurses passed in hygiene and dietetics (3 with distinction); 7 nurses passed in medical and surgical nursing; and 7 nurses passed in fevers (1 with distinction). 9 nurses completed the examination, and received the Scottish Board of Health Certificate.

**STAFF ILLNESSES.**—In all, 19 nurses and 5 maids were warded for some illness or other.

**INOCULATIONS.**—14 nurses were vaccinated with T.A.B. vaccine against enteric fever. All the staff were vaccinated against smallpox.

TABLE A.

ADMISSIONS AND DISCHARGES AS NOTIFIED, AND NUMBER OF PATIENTS  
IN HOSPITAL AT THE BEGINNING AND END OF YEAR.

DISEASE.	In Hospital, 1st January, 1920.		DISCHARGED.		Remaining in Hospital on 31st Dec., 1920.
	Admitted.		Recovered.	Died.	
Enteric Fever, -	5	59	53	4	7
Scarlet Fever, -	134	1,128	1,063	11	188
Diphtheria, -	38	313	288	25	38
Puerperal Fever, -	4	39	26	10	7
Erysipelas, -	1	33	25	6	3
Cerebro-Spinal Meningitis, -	1	29	8	21	1
Surgical Tuberculosis, -	—	107	104	3	—
Pneumonia, -	1	55	35	14	7
Influenza, -	—	8	8	—	—
Measles, -	—	10	10	—	—
Whooping Cough, -	—	2	1	1	—
Venereal Diseases, -	2	124	114	4	8
Others, -	1	43	37	6	1
Totals,	187	1,950	1,772	105	260

TABLE B.

CASES AS NOTIFIED, CLASSIFIED ACCORDING TO AREA  
FROM WHICH ADMITTED TO HOSPITAL.

DISEASE.	Middle Ward.	Upper Ward.	Lower Ward.	*Burghs and Other Counties.	Military Cases.
Enteric Fever, -	53	—	—	6	—
Scarlet Fever, -	1,118	9	—	1	—
Diphtheria, -	306	1	—	6	—
Puerperal Fever, -	37	—	—	2	—
Erysipelas, -	28	1	—	3	1
Cerebro-Spinal Meningitis, -	25	2	—	2	—
Surgical Tuberculosis, -	93	6	2	6	—
Pneumonia, -	52	1	—	1	1
Influenza, -	8	—	—	—	—
Measles, -	8	—	—	—	2
Whooping Cough, -	2	—	—	—	—
Venereal Diseases, -	46	4	1	73	—
Others, -	38	3	1	1	—
Totals,	1,814	27	4	101	4

\* Motherwell, 22; Hamilton, 34; Wishaw, 15; Airdrie, 5; Coatbridge, 13;  
Lanark, 7; Rutherglen, 3; Dumfriesshire, 1; Clackmannanshire, 1.





